HM Revenue & Customs

Certificate F

Purchase by an eligible body of computer software for use in medical research, diagnosis or treatment

Part 1 To be completed by the purchaser

Full name

Status in the organisation

Name and address of the organisation

Name

Address

Postcode

Type of organisation (put 'X' in one box)

- Health authority or special health authority in England or Wales ☐
- Health Board in Scotland ☐
- Health and Social Services Board in Northern Ireland ☐
- Hospital whose activities are not carried on for profit ☐
- Research institution whose activities are not carried on for profit ☐
- Charitable institution providing care or medical or surgical treatment for disabled people ☐
- Common Services Agency for the Scottish Health Service ☐
- Northern Ireland Central Services Agency for Health and Social Services ☐
- Isle of Man Health Services Board ☐
- Charitable institution providing rescue or first aid services ☐
- National Health Service trust established under Part I of the National Health Service and Community Care Act 1990 or the National Health Service (Scotland) Act 1978 ☐

Is the named organisation (put 'X' in one box)

- Buying ☐
- Hiring ☐

Provide their details below.

Name and address of supplier

Name

Address

Postcode

Description of computer services or software

Will the computer software be used in (put 'X' in one box)

- Medical research ☐
- Medical diagnosis ☐
- Medical treatment ☐

Part 1 continued

Declaration

I have read the guidance in Charity funded equipment for medical and veterinary uses (VAT Notice 701/6) and apply for zero rating of the supply under Group 15, items 5 or 6 of the zero rate Schedule to the VAT Act 1994.

The above organisation is paying for this supply with funds provided entirely by a charity or from voluntary contributions.

I understand it is the supplier's responsibility to make sure that the services or software supplied are eligible before zero rating them.

I declare that the information on this form is correct.

Signature

Date DD MM YYYY

Part 2 To be completed by the supplier

Declaration

I have read the guidance in Charity funded equipment for medical and veterinary uses (VAT Notice 701/6) and agree that the services or software supplied come within the description stated above.

Signature

Date DD MM YYYY

Any other information

For example, any steps taken to verify the information on this form.