



ZANZIBAR REVENUE BOARD

VALUE ADDED TAX DEPARTMENT (VAT)

(Complete In Quadruplicate)

To: Commissioner
P.O. Box 2072
Zanzibar.

APPLICATION FOR UTILIZATION OF VAT RELIEF GRANTED TO DIPLOMATIC MISSIONS ON LOCAL SUPPLIES

Delete which is not applicable:

1. NAME OF MISSIONS / CONSULATE
2. PARTICULARS OF THE PURCHASING OFFICER

- a) Name of Officer
b) Title of the Officer and Identity Card Number

3. DESCRIPTION OF GOODS:

No	TYPE OF GOODS	QUANTITY	VALUE IN T.SHS.	INTENDED USE
1.				
2.				

Signature of the Purchasing Officer

Date:

4. CONFIRMATION BY THE MISSION:

I here by confirm that the above described good are for official use of.....

.....

.....

.....

.....

Head of Mission

Date

5. APPROVAL BY FOREIGN AFFAIRS

- (a) Reference No.
(b) Request is APPROVED/NOT APPROVE

.....

.....

Signature

Date

6. FOR OFFICIAL USE BY THE VAT DEPARTMENT

VAT Head Office

Request is APPROVED / NOT APPROVED *

.....

Commissioner

.....

Date

***Distributions:* Original – Commissioner**

***Duplicate – Permanent Secretary, Ministry of Foreign Affairs and
International Co-operation.***

TriPLICATE – Supplier of goods

Quadruplicate - Applicant