

Eswatini Revenue Service

DOMESTIC TAXES DEPARTMENT



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VT 03

VAT REFUND FOR DIPLOMATS, DIPLOMATIC AND CONSULAR MISSIONS AND INTERNATIONAL ORGANISATIONS

(Section 50 of the VAT Act, 2011)

(NOTE: Notes for completion of the form have been provided overleaf)

IDENTIFICATION					
Name of Diplomat					
Country of Diplomat					
Mission/Organisation					
Postal Address					
Physical Address					
Telephone Cell					
Email					
BANK DETAILS					
Bank					
Branch					
Branch Code					
Account Name					
Account Number					
DETAILS OF VAT REFUND REQUESTED					
Period FROM					
Amount requested					
Name					
Signature:D	ate:				

SUPPLEMENT					
Supplement Number					
Name of Diplomat, Diploma	tic Mission or I	International Organisation			
Item (brief description)	Quantity	Name of Supplier and TIN	Invoice Number	Total price paid	VAT Paid
		TIN			
			TOTAL		
FOR ERS OFFICIAL USE					
Receipt Number:		Amount of refund Approved:_			
Date Received:		Signature:		-	
Officer's Name:					
Signature:					
		Commissioner:		Approved	Disapproved