

## **Application for EU zero-rate VAT**

## All sections must be completed, then FAX to +44 (0) 845 3883496

VAT Number: (EU MEMBERS ONLY)																
		Buyer Company Details														
Auction Name						Compar	ny Name Name									
Country of Auction					-	Address	Address									
Buyer No.																
Invoice Total						COUNT	RY									
								Phone								
VAT Amount								E-Mail								
	_							Fax No.								
Destination Address																
You certify that the goods bought at the above auction will be exported to this location within the specified deadline of country of auction. If you re unsure of the deadline, please contact accounts@workassets.com																
			COUNT	RY					_							
						Met	n	od ot I	Expor	t						
Workassets require every export to be supported by valid export documents. Otherwise the buyer may be liable for a further VAT charge.  If using private transport indicate here and supply the vehicle registration.			Transpo (Air / Se Date of l (Estimat	a / Road Export	/ Courier)											
			Transpo (or vehic	rt Agent cle registr	ation)											
			Contact Name of Transport Agent (Required)													
			Phone Number of Transport Agent (Required)													
		Email Address of Transport Agent (Required)														
I certify that assets sold in the above invoice will be/have been exported as shown, and original shipping documents will be supplied to Auction Accounts, Biopharm-Auctions at accounts@biopharm-auctions.com																
Signed									Date							
Company Name										Job Title	•					

(Please note this must be signed by hand)