Serial No (optional):					
1. ELIGIBLE BODY/INDIVIDU.	AL				
Designation/name					
Street and No					
Postcode, place					
(Host) Member State					
<u>`</u>	RESPONSIBLE FOR STAMPING	(name, addı	ress and telephone number)		
	Faderal Public Service F		-		
General Administration of TAXES  Operational Expertise and Support			Custom and Excise General Administration Administration Operations - Central component - Douane3		
International Relations			Boulevard du Roi Albert II, 33 - box 372		
Boulevard du Roi Albert II, 33 - bo	x 517		1030 Brussels		
1030 Brussels					
Service: vat.diplomat@minfin.fed.b	IGIBLE BODY OR INDIVIDUAL		E-mail: da.operations.diplomat@minfin.fed.be		
The eligible body or individual (1)	•				
(a) that the goods and/or services se	et out in box 5 are intended (2)				
		□ For tl	or the personal use of  a member of a foreign diplomatic mission		
☐ foreign diplor	itic mission				
□ foreign consu	lar representation	ation □ a member of a foreign consular representation			
□ a European l	body to which the Protocol on the				
	d immunities of the European Union				
applies					
□ an internation			$\Box$ a staff member of an international organisation		
	rces of a State being a party to the c Treaty (NATO force)				
	ces of a Member State taking part in a e common security and defence policy				
<ul> <li>the armed forces of the United Kingdom stationed in the island of Cyprus</li> </ul>			(designation of the institution) (see box 4)		
☐ For the use of the European Commission or any agency					
or body established under Un	nion law, where the Commission or the sponse to the COVID-19 pandemie	at agency or			
-		aditions and	limitations applicable to the eventual in the heat Member		
State mentioned in box 1, and	escribed at box 3 comply with the col	iditions and	limitations applicable to the exemption in the host Member		
(c) that the information above is fur	nished in good faith.				
and/or services were supplied, the V		be due if the	hich the goods were dispatched or from which the goods goods and/or services did not comply with the conditions		
	Name and status of signatory				
DI L			Gi-mature.		
Place, date  4. STAMP OF THE BODY (in case of exemption for personal use)			Signature		
4. STAMP OF THE BODY (in ca	ise of exemption for personal use)				
	1				
			Name and status of signatory		
D1 1	Grann.		Q:		
Place, date	Stamp		Signature		

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DUTY IS REQUEST		ICES, FOR WHICH I	HE EXEMPTION FE	KOM VAT AND/OR E	XCISE	
A. Information concernin	g the supplier/authorised wareh	ousekeeper				
1) Name and address:		_				
2) Member State						
3) VAT/excise number o	r tax reference number					
	g the goods and/or services:					
3. Information concerning	g the goods and/or services.					
	etailed description of the goods and/or services (3) (or reference to the attached order form)  Quan		Value excluding V	T and excise duty Currency		
			Value per unit	Total value		
		Total amount				
CEDTIFICATION R	Y THE COMPETENT AUTH		NCT MEMBED CTAT	ne.		
	of goods and/or services describ		OSI WIEWIDER STAT	Ŀ		
□ totally		a quantity of		(number) (4)		
·	mption from VAT and/or excise			(number) (4)		
				Name and status of	f signatory	
Place, dat	Signature					
PERMISSION TO DIS	SPENSE WITH THE STAMP U	NDER BOX 6 (only in	case of exemption for o	official use)		
By letter No:						
Dated:						
	arta atau.					
Designation of eligible in	ISHILLION:					
Is by						
Competent authority in h	ost Member State:					
Dispensed from the oblig	ation under box 6 to obtain the	stamp				
				Name and status of signatory		
Place, dat	te	Stamp		Signature	e	