

Reference No: _____



Department of Value Added Tax
Centre Point Building
Triq Ta' Paris
Birkirkara BKR 4633, Malta.
Tel: 153

Application for Refund of VAT on Purchases made in Malta

Name _____
Surname _____
Address _____
City _____ Post Code _____
Country _____
Passport No: _____ Nationality _____
Date of Arrival _____ Date of Departure _____
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	Description of Purchases	VAT No	Value €	For Official Use REFUND PAYABLE
1				
2				
3				
4				
5				
6				
7				

Relative fiscal receipts are attached

I request that VAT paid on items listed above be remitted to me by draft at the above address in the currency indicated hereunder:

US Dollars UK Sterling Australian Dollars

Signature of Applicant: _____ Date: _____

For Official Use

I certify that the above items have been checked and found to correspond to applicant's declaration.

Signature of Customs Officer _____ Date: _____