



**GOVERNMENT OF SAINT LUCIA
INLAND REVENUE DEPARTMENT
VALUE ADDED TAX
Disclosure of Errors Form**

1. Name of Taxpayer

2. VAT Taxpayer Account Number

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3. Business Address

4. Mailing Address

5. Telephone Number

6. Tax Period

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Month Year

7. Briefly tell us the amount of the error(s) and explain why the error(s) arose. *Continue on a separate sheet is necessary.*

LINE	Line Description	Submitted	Revised
100	Standard Rated Sales – (VAT Inclusive 12.5%)		
101	Import of Services – (VAT Inclusive 12.5%)		
105	Sales by Other Providers in Tourism Sector – (VAT Inclusive 10%)		
106	Sales by Accommodation Providers - (VAT Inclusive 7%)		
110	Zero Rated (Duty Free) Sales		
111	Zero rated (Export) Sales		
112	Zero rated (Other) Sales		
115	Exempt Sales		
120	Total Sales (Add boxes 100 to 105)		
125	VAT Payable on Standard Rated Sales Box 100 x (12.5/112.5)		
126	VAT Payable on import of service Box 101 x (12.5/112.5)		
130	VAT Payable on Sales by Other Providers in Tourism Sector Box 105 x (10/110)		
131	VAT Payable on Sales by Accommodation Providers Box 106 x (7/107)		
135	VAT Adjustments		
136	VAT payable on Capital Goods/Raw Materials (Deferred Option)		
140	Total Output Tax (add boxes 125 to 136)		
200	Value of Imports (VAT exclusive)		
205	Value of Domestic Purchases – (VAT Exclusive)		
210	Value of Domestic Purchases (10%) VAT Exclusive		
211	Value of Domestic Purchases (7%) VAT Exclusive		
212	Value of capital goods purchased (VAT exclusive)		
215	VAT paid on Imports		
216	VAT Paid on Import of Services		
217	VAT claimed on Raw Materials / Capital Goods (Deferred Option)		
220	VAT paid or payable on domestic purchases - 12.5%		
225	VAT paid or payable on domestic purchases - 10 %		
226	VAT paid or payable on domestic purchases - 7 %		
230	VAT Adjustments		
235	Credit from Previous Period		
240	Total Input Tax (add boxes 215 to 235)		
300	Tax Payable		
305	Penalty Due		
310	Interest Payable		
315	Total Due		
320	Amount Paid on Filing		
325	Excess Input Tax for the Period		
	Total Credits to carry forward (Add box 235 and 325)		
	Total Penalties and Interest (Total box 305 and 305a)		
	Total Tax, Penalties and Interest Due (Add box 300 to 310)		

SIGN DECLARATION ON PAGE 2

DECLARATION

I hereby certify that the information on this form is, to the best of my knowledge, true, correct and complete and that no application for refund in respect to this Tax Period, Customs Declaration, or Receipt has been previously submitted.

Signature

Title

Date

<input type="text"/>	<input type="text"/>	<input type="text"/>
Day	Month	Year

IT'S A SERIOUS OFFENCE TO MAKE A FALSE DECLARATION

FOR INLAND REVENUE USE ONLY

Application Received

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Day Month Year

Verified by (please sign)

Application Entered by

Approved by (please sign)