



**GOVERNMENT OF SAINT LUCIA  
INLAND REVENUE DEPARTMENT  
VALUE ADDED TAX**

**Disclosure of Errors in the VAT Returns Filed**

1. Name of Taxpayer <input style="width:95%" type="text"/>	2. VAT Taxpayer Account Number <input style="width:80%" type="text"/>
3. Business Address <input style="width:95%" type="text"/> <input style="width:95%" type="text"/> <input style="width:95%" type="text"/>	4. Mailing Address <input style="width:95%" type="text"/> <input style="width:95%" type="text"/> <input style="width:95%" type="text"/>
5. Telephone Number <input style="width:80%" type="text"/>	6. Tax Period <input style="width:40%" type="text"/> <input style="width:40%" type="text"/> <b>Month                      Year</b>
7. Briefly tell us the amount of the error(s) and explain why the error(s) arose. <i>Continue on a separate sheet is necessary.</i> <input style="width:95%" type="text"/> <input style="width:95%" type="text"/> <input style="width:95%" type="text"/> <input style="width:95%" type="text"/> <input style="width:95%" type="text"/>	

LINE	Line Description	Submitted	Revised
1	Standard Rated Supplies (VAT Inclusive)		
2	Hotel Accommodation (VAT Inclusive)		
3	Zero Rates Supplies (Sales)		
4	Exempt Supplies		
5	Total Supplies (Add Lines 1 , 2, 3 and 4)		
6	VAT Payable on Standard Rated Sales (Line 1× (15/115)		
7	VAT Payable on Goods and Services Provided by Hotels (Line 2× (10/110)		
8	VAT Adjustments		
9	Total Output Tax (Add Lines 6, 7 and 8)		
10	Value of Imports		
11	Value of Domestic Purchases		
12	VAT Paid on Imports		
13	VAT Paid on Domestic Purchases		
14	VAT Adjustments		
15	Credit Brought Forward from Previous Period		
16	Total Input Tax (Add Line 12 to 15 )		
17	Tax Payable (If Line 9 is greater than Line 16; enter difference)		
18	Penalty for Late Filing (\$250 per month or part thereof)		
18	Penalty for Late Payment (10% of Line 17)		
19	Interest Due (1.25% per month or part thereof)		
22	Credit for this Period (if Line 16 is greater than Line 9; enter difference)		
	Total Credits to carry forward (Add Line 15 and 22 )		
	Total Penalties and Interest (Total Lines 18 and 19 )		
	Total Tax, Penalties and Interest Due (Add Lines 17 to 19)		

**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 style="width:95%" type="text"/>	<input style="width:95%" type="text"/>	<input style="width:40px" type="text"/> <input style="width:40px" type="text"/> <input style="width:40px" type="text"/>
		Day Month Year

**IT'S A SERIOUS OFFENCE TO MAKE A FALSE DECLARATION**

**FOR INLAND REVENUE USED ONLY**

Application Received	<input style="width:20px" type="text"/> <input style="width:20px" type="text"/>	Verified by (please sign)	<input style="width:95%" type="text"/>
	Day Month Year		
Application Entered by	<input style="width:95%" type="text"/>	Approved by (please sign)	<input style="width:95%" type="text"/>