

GOVERNMENT OF SAINT LUCIA INLAND REVENUE DEPARTMENT

VALUE ADDED TAX NOTICE OF OBJECTION

Please complete all section to ensure the Department considers your objection.

The Objection can be filed by the registered taxpayer or appointed representative.

More information on "Objections to Assessments" or "Decisions" can be sourced in the VAT Act or the Objections/Appeals Guide.

1 <u>Registration Information</u>

Tax Account Number	
Registered Name	Trade Name
Business Address	Business Mailing Address
Telephone No	Fax No.
Email Address	

2 Objecting to an Assessment

I am objecting to the tax payable or credit amount stated in the assessment notice dated Kindly attach a copy.

DD	ММ	YY

a. <u>Grounds for Objecting to an Assessment</u>.

Please carefully check the grounds for objection, and tick the relevant box (es). If none of the grounds listed are appropriate please, provide a letter explaining your objection. You may tick more than one box.

The Issuance of an Assessment:

 (a) Standard rated Supplies – VAT Inclusive (Line 1) (c) Zero Rated Supplies (Line 3) (e) VAT payable on Standard Rated Sales (Line 6) (g) VAT Adjustments (Line 8) (i) Value of Domestic Taxable Purchases (Line 11) (k) VAT paid/payable on Domestic Taxable Purchases(Line 13) (m) Credit for this Period (Line 15) (o) Tax payable (Line 17) (a) Penalty for Late Filing (Line 18) 	 (b) Goods and Services provided by a Hotel (Line 2) (d) Exempt Supplies (Line 4) (f) VAT payable on Hotel Accommodation (Line 7) (h) Value of Imports (Line 10) (j) VAT paid on imports (Line 12) (l) VAT Adjustments (Line 14) (n) Total input Tax (Line 16) (p) Penalty for Late Payment (Line 18) (r) Interest Due (Line 19)
(q) Penalty for Late Filing (Line 18) (s) Total Tax, Penalties & Interest Due (Line 20)	(r) Interest Due (Line 19)



3. Objecting to a Decision

I am objecting to the decision stated in your letter dated Kindly attach a copy.

a. Grounds for Objecting to a Decision.

Please carefully check the grounds for objection, and tick the boxes relevant to your situation. You may tick more than one box.

DD MM



4. Reasons for Objections

Please provide in detail the grounds upon which your objection is based.

5. Declaration

I declare that the information given on this form is, to the best of my knowledge, true, correct and complete, and that I have the authority to make this disclosure of the information provided.

Signature: _____

Tile: _____

Date: _____