

# VAT refund form

Please fill in this form and send to:

European Tax Service AB  
Norra Långebergsgatan 6  
SE-41261 Göteborg  
SWEDEN

Please enclose your company's **recent** certificate of status and all **original** invoices and receipts.

Company		Contact person	
Full postal address			
Country	Telephone	Fax	e-mail
Bank name, city and account No. (IBAN account No. preferably):			

I solemnly declare that the information given above is true and correct and that no taxable activities have been conducted in Sweden.

Power of Attorney is hereby granted to European Tax Service AB, SE556670825001, to recover Swedish Value Added Tax. This Power of attorney in particular covers the right to sign applications to the Tax Authority, the right to accept repayment from the Tax Authority and otherwise represent the issuer of this Power of Attorney in dealing with the authorities.

The issuer of the Power of Attorney understands that the receiver of the Power of Attorney or the persons used by him do not accept any financial responsibility in connection with the handling of this matter.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Company

\_\_\_\_\_  
Signature of authorised person

\_\_\_\_\_  
Name of authorised person (please type)