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Date.....

To: Ministry of Information and Communication
P.O. Box 30025 - 00100
Nairobi, Kenya

**APPLICATION FOR AUTHORITY TO ZERO RATE VAT ON TAXABLE
GOODS AND SERVICES PROCURED BY APPROVED FILM
PRODUCERS**

1. Name of approved film production company.....
2. License No.....
3. PIN of producer.....
4. Project.....
5. Name of authorized person Signature
6. Name and Address of supplier.....
7. Supplier's PIN Phone
7. Description of goods
8. Pro-forma Invoice number VAT amount

DEPARTMENT OF FILM SERVICES

DOMESTIC TAXES DEPARTMENT
VAT FREE PURCHASE APPROVED

Entry No.

Name

Name.

Signature.....

Signature.....

Stamp

Date.....

Date.....

Designation.....

Designation.....
