Numru tar-Referenza

KUMMISSARJU TAT-TAXXI
Uffiċċju tal-Kummissarju tat-Taxxi
Triq Enrico Mizzi
Victoria
Għawdex
Tel: 153

APPLIKAZZJONI GĦAL GĦOTJA FUQ XIRI TA' APPARAT SPEĊJALI GĦALL-UŻU MINN PERSUNI B'DIŻABILITÀ

Parti A: Dettalji ta' min qed jimla l-applikazzjoni f'ismu jew f'isem persuna b'diżabilità (fil-każ ta' Għaqda mhux Governattiva imla' l-Parti B)

Isem: _____	**Kunjom:** _____
Numru tal-Karta tal-Identità: _____	
Indirizz: _____ _____	
Numru tat-Telefon: _____	**Indirizz Elettroniku:** _____

Parti B: Dettalji tal-Għaqda mhux Governattiva (fil-każ ta' individwu li qed japplika għalih jew f'isem persuna b'diżabilità imla' Parti A)

Isem tal-Għaqda: _____	
Numru tal-reġistrazzjoni mal-Kummissarju għall-Għaqdiet Volontarji: _____	
Indirizz tal-Għaqda: _____ _____	
Numru tat-Telefon: _____	**Indirizz Elettroniku:** _____

Parti Ċ: Dettalji ta' min ser juża' l-Apparat Speċjali u dettalji fuq l-Apparat Speċjali (trid timtela minn KULL kategorija ta' applikant)

Isem: _____	**Kunjom:** _____
Numru tal-Karta tal-Identità: _____	
Numru tal-Karta tal-Identità Speċjali: _____	
Livell ta' Diżabilità (aqta' kif applikabbli): Severa/Ħafifa/Baxxa[1]	
Indirizz: _____ _____	
Deskrizzjoni tal-Apparat Speċjali Mixtri: _____ _____	
Valur tal-Apparat Speċjali Mixtri: € _____	
In-numru tal-VAT ta' minn fejn inxtara l-Apparat Speċjali: (jekk applikabbli) _____	

Parti D: Dokumenti li jridu jkunu mehmuża mal-applikazzjoni

- Kopja tal-Karta tal-Identità tal-persuna b'diżabilità;
- F'każ li l-applikazzjoni qed issir f'isem persuna b'diżabilità, kopja tal-Karta tal-Identità ta' min qed jissottometti l-applikazzjoni. F'kull każ, fin-nuqqas tal-Karta tal-Identità hija mitluba kopja ta' xi dokument ieħor kif spjegat fil-paragrafu 4(ii)(b) ta' din in-Notifikazzjoni;
- L-irċevuta fiskali oriġinali tax-xiri tal-apparat speċjali;
- Il-fattura oriġinali li tindika t-tip ta' apparat speċjali mixtri;
- Fil-każ ta' apparat speċjali mhux mixtri minn Malta:
  - il-fattura oriġinali maħruġa mill-fornitur tal-apparat speċjali;
  - id-*delivery note* u d-dokument oriġinali li jikkonferma li l-ħlas komplet sar;
  - fejn meħtieġ, l-awtorizzazzjoni mill-Maltapost/Dipartiment tad-Dwana ta' Malta sabiex jiġi kkonfermat li (i) l-apparat speċjali verament inxtara; (ii) li l-valur tax-xiri tal-apparat speċjali tħallas kollu flimkien mad-dazju u VAT dovut fuqu kif ikun meħtieġ; (iii) li dan ix-xiri jkun sar mil-applikant għall-applikant; u (iv) li l-apparat speċjali ġie kkunsinnat fir-residenza tal-applikant jew ta' min ser jibbenefika minn dan l-apparat speċjali. L-apparat speċjali mixtri jrid ikollu wkoll ċertifikat ta' konformità mal-*EU standard safety regulations,* kif ikun meħtieġ.

[1] Dan il-livell huwa kif stabbilit mill-indiċi *Barthel*

Nitlob sabiex l-għotja titħallas kif jidher hawn taħt:

Isem: _____

Indirizz: _____

_____

Niddikjara li d-dettalji u l-informazzjoni f'din l-applikazzjoni huma korretti. Qed nibgħat ukoll id-dokumenti kollha meħtieġa ma' din l-applikazzjoni. Niddikjara wkoll li din it-talba hija waħda finali.

Isem sħiħ tal-applikant	Firma	Data	Nru. tat-telefon

Noti:

Fejn jirriżulta li t-talba saret b'qerq, il-Ministeru għall-Finanzi jista' jieħu passi kriminali kontra dawk responsabbli. F'każ li jsir ħlas mhux korrret bħala għotja, l-istess Ministeru jirriserva d-dritt li jiġbor lura il-flus imħallsa bi żball.

*Din l-applikazzjoni għandha tkun indirizzata lid-DIPARTIMENT TAT-TAXXA INTERNI, flimkien mad-dokumenti kollha meħtieġa u għandha tasal fid-Dipartiment sa **mhux aktar tard minn tliet xhur mid-data tax-xiri tal-apparat speċjali**. Huwa rrakkomandat li jekk id-dokumenti jintbagħtu bil-posta, dawn għandhom jintbagħtu bil-posta reġistrata. Applikazzjonijiet milqugħa wara dawn it-tliet xhur jiġu kkunsidrati bħala applikazzjonijiet invalidi.*

It-tagħrif personali mogħti fuq din il-formola huwa protett u wżat skont l-Att dwar il-Protezzjoni u l-Privatezza tad-*Data*.

It-tagħrif mogħti fuq din l-applikazzjoni ser jintuża mill-Ministeru għall-Finanzi u mid-Dipartiment tal-VAT.

Reference Number

COMMISSIONER FOR REVENUE
Office of the Commissioner for Revenue
Enrico Mizzi Street
Victoria
Gozo
Tel: 153

APPLICATION FOR A GRANT ON THE PURCHASE OF SPECIAL EQUIPMENT FOR USE BY PERSONS WITH DISABILITY

Part A: Details of applicant who is applying on own behalf or on behalf of a person with disability (in the case of Non-Governmental Organisations, fill in Part B)

Name: _____	**Surname:** _____
Identity Card Number: _____	
Address: _____ _____	
Telephone Number: _____	**Email Address:** _____

Part B: Details of the Non-Governmental Organisation (in the case of an individual who is applying on own behalf or on behalf of a person with disability, fill in Part A)

Name of Organisation: _____	
Registration Number with Commissioner for Voluntary Organisations: _____	
Address of Organisation: _____ _____	
Telephone Number: _____	**Email Address:** _____

Part C: Details of who will be using the Special Equipment and details of the Special Equipment (has to be filled in by ALL categories of applicants)

Name: _____	**Surname:** _____
Identity Card Number: _____	
Special Identity Card Number: _____	
Disability Level (cross off as applicable): Sever/Mild/Low[1]	
Address: _____ _____	
Description of the Special Equipment: _____ _____	
Purchse Price of the Special Equipment: € _____	
VAT number of the seller of the special equipment: (if applicable) _____	

Part D: Documents that need to be submitted together with the application

- A copy of the Identity Card of the person with disability;
- If this application is being submitted on behalf or a peson with disability, a copy of this person's ID Card. In both cases, in the absence of an ID Card, a copy of any other official document as described in paragraph 4(ii)(b) of this Notice is to be submitted;
- The original fiscal receipt of the special equipment;
- The original invoice of the special equipment;
- In the case of special equipment not purchased from Malta:
  - the original invoice issued by the supplier of the special equipment;
  - the delivery note and original documentary proof that final payment has been effected;
  - As may be required, clearance from Maltapost/Department of Customs. These documents must confirm that: (i) the special equipment was really purchased; (ii) that the purchase price of the special equipment, which price includes duty and VAT as may be required, was really paid in full; (iii) that such a purchase was effected by the applicant for the applicant; and that (iv) the special equipment was delivered to the applicant's residence or to the residence of the special equipment's beneficiary. The purchased special equipment must also have a certificate of conformity with EU standard safety regulations, as may be required.

[1] This level is as established by the Barthel Index

I request that payment of the grant be made as follows:

Name: _____

Address: _____

_____

I declare that the details and the information in this application are correct. I am also submitting all the required documents with this application form. I further declare that this claim is final.

Name in full of applicant	Signature	Date	Tel. number

Notes:

Where a fraudulent claim arises, the Ministry for Finance may institute criminal proceedings against those responsible. In the event of an incorrect payment of a claim, the same Ministry reserves the right to recover funds paid in error.

This application shall be addressed to INLAND REVENUE DEPARTMENT, together with all the relevant documents, and shall be delivered at the Department ***by not later than three months from the date of purchase of the special equipment****. It is recommended that if documents are sent by post, registered mail should be used. Applications received after this three month period shall be deemed to be invalid applications.*

Personal information provided on this form is protected and used in accordance with the Data Protection Act.

The information shown on this application form will be used by the Ministry for Finance and the Department of VAT.

SKEDA B

L-Ewwel Parti

Adattament tal-karozzi, inklużi kontrolli tal-idejn u sijts li jduru;
Amplifiers għall-apparat komunikattiv għall-persuni neqsin mis-smigħ;
Bath tub lifters
Typewriters tal-*Braille*;
Bsaten Bojod;
Bsaten u *Ferrules*;
Buggies speċjali;
Chairlifts;
Gutter Frames;
Hoists;
Lifts biex iddaħħal is-siġġu tar-roti fil-karozza;
Mouth sticks;
Platform stair lifts;
Pressure relief cushions;
Prone standers;
Saqqijiet għal kontra l-feriti;
Sedili għoljin tat-*toilet*;
Sedili tat-*toilet* li jintefħu;
Siġġijiet tar-roti manwali;
Siġġijiet tar-roti tal-elettriku;
Sijts speċjali;
Siġġijiet *special feeder*;
Swimming Pool Lifters;
Toilet frames/surrounds;
Walkers speċjali tat-tfal.

SCHEDULE B

First Part

Customisation of vehicles, including hand controls and moveable seats;
Amplifiers for communications devices for persons with impaired hearing;
Bath tub lifters;
Braille typewriters;
White Sticks;
Walking Sticks and Ferrules;
Special Buggies;
Chairlifts;
Gutter Frames;
Hoists;
Wheelchair lifts for vehicles;
Mouth sticks;
Platform stair lifts;
Pressure relief cushions;
Prone standers;
Pressure relief mattresses;
Raised toilet seats;
Padded/Inflatable toilet seats;
Manual wheelchairs;
Powered wheelchairs;
Special seats;
Special feeder chairs;
Swimming pool lifters;
Toilet frames/surrounds;
Children special walkers.

It-Tieni Parti

Sodod speċjali (sodod b'għoli varjabbli, idrawliċi jew motorizzati);
Pultruni *Lifting* u/jew *Reclining*;
Apparat ta' għajnuna fil-kamra tal-banju bħal siġġijiet tax-*shower* u *grab rails;*
Guide Dogs (Liċenzjati mill-*Malta Guide Dog Foundation*);
Service Dogs (Liċenzjati mill-*Malta Service Dog Association*);
Magni tal-*continuous positive airway pressure therapy* (CPAP).

Second Part

Variable height beds, hydraulic or motorized;
Lifting/Reclining armchairs;
Bathroom aids (eg: shower chairs, grab rails);
Guide Dogs (Licensed through the Malta Guide Dog Foundation);
Service Dogs (Licensed through the Malta Service Dog Association);
Continuous positive airway pressure therapy (CPAP) machines.