



SRA REF NO.

SWAZILAND REVENUE AUTHORITY BAGGAGE DECLARATION (FORM E) AND VAT REFUND FORM

THIS FORM MUST BE COMPLETED BY ALL PERSONS ENTERING SWAZILAND
(All values of goods declared must be in the currency in which the goods were purchased. Please indicate the currency as Rand, USD, €, etc. as the case may be against each declaration. **Please see overleaf for more information**)

Full Name: Passport Number:

Physical Address in Swaziland: ID No:

Contact Details: Country of Departure:

1. Indicate whether you are a VISITOR, RETURNING RESIDENT OR NEW RESIDENT by ticking a box below

VISITOR RETURNING RESIDENT NEW RESIDENT

2. Please enter the total cost of all goods purchased outside Swaziland which are zero rated or exempted from VAT in Swaziland (See information overleaf)

E

3. Please enter below the cost of all other goods purchased outside Swaziland:

No.	Goods	Qty	Value (indicate currency)
01.	Clothing	Kg	
02.	Food Staff	Kg	
03.	Household Linen	Kg	
04.	Electrical Appliances	U	
05.	Domestic Hardware - Non Electrical	Kg	
06.	Alcoholic Beverages	L	
07.	Other		
	TOTAL		

4. Are you carrying more than E15 000 or equivalent in cash or negotiable bearer instruments? (Please tick)

I declare that I have in my possession only goods of the quantities and values indicated; that I do not have any prohibited or restricted goods and that the above information is true and complete.

SIGNATURE: _____ DATE: _____

FOR OFFICIAL USE ONLY

Total Value _____ Amount Payable _____

Receipt Number _____ Dated _____

OFFICER (Name) _____ OFFICER (Signature) _____



VAT REFUND FORM

SRA REF NO.

Important Note: This tear off slip must be completed only when the VAT Refund MOU is applicable. This tear-off slip will be used to claim the VAT from South Africa and must therefore bear your correct and complete details. Please complete your details again and sign.

Full Name: Passport Number:

Physical Address in Swaziland: Tel / Cell:

Port of Entry: Place of Work:

Number of Invoices: Date of Entry:

I hereby request the SRA to apply for the refund of VAT paid in South Africa on my behalf on the goods on the attached invoice(s) and authorize that such monies when received be used to offset my VAT liability in Swaziland.

SIGNATURE: _____ DATE: _____