

**EXCISE DUTY RETURN FOR ALCOHOL AND ALCOHOLIC BEVERAGES EXCEPT BEER**

(Read the instructions before completing the form.)

Tax number:		Registration number:	
Name:			
Registered office / address:			
Tax period:			

<b>1. EXCISE DUTY TAXPAYER:</b>				
PRODUCER	<input type="checkbox"/>	TEMPORARILY REGISTERED CONSIGNEE	<input type="checkbox"/>	
REGISTERED CONSIGNEE	<input type="checkbox"/>	REGISTERED CONSIGNOR	<input type="checkbox"/>	
SMALL SPIRIT PRODUCER	<input type="checkbox"/>	HOLDER OF A DUTY-FREE SHOP PERMIT	<input type="checkbox"/>	
SMALL WINE PRODUCER	<input type="checkbox"/>	AUTORISED EXCISE WAREHOUSEKEEPER	WHO MEETS THE CONDITIONS FOR A SMALL PRODUCER	<input type="checkbox"/>
CERTIFIED CONSIGNEE	<input type="checkbox"/>		WHO DOES NOT MEET THE CONDITIONS FOR A SMALL PRODUCER	<input type="checkbox"/>
TEMPORARILY CERTIFIED CONSIGNEE	<input type="checkbox"/>			<input type="checkbox"/>
<b>2. OTHER EXCISE DUTY PAYERS:</b>				
OTHER EXCISE DUTY PAYERS	<input type="checkbox"/>	DISTANCE SELLING	<input type="checkbox"/>	
<b>3. EXEMPT USER:</b>				

<b>Other information</b>	
Excise number of the temporarily authorized consignee:	
Excise number of the temporarily certified consignee:	
ARC / LRN reference number:	
Date of receipt of excise goods:	
<i>Place and date:</i>	I hereby confirm the accuracy of the stated information.  Signature of the excise duty taxpayer or responsible person

<b>OFFICIAL RECORD – completed by the tax authority</b>	
Office:	
Excise Duty Department:	
Date of submission:	
Date of confirmation:	
Reference number:	
Official person:	