



Send completed form to:
Tax Administration
P.O. Box 20
FI-00052 VERO
FINLAND



APPLICATION FORM FOR EXCISE DUTY REFUNDS
UNDER THE DEFENSE COOPERATION AGREEMENT
(DCA)

Applicant

Applicant's name as registered officially / Applicant's (natural person's) last name				Applicant's (natural person's) first and middle name			
Date of birth (ddmmyyyy)		Applicant's ID code		ID type		Citizenship	
				☐ Personal identity code ☐ TIN in home country		☐ VAT number ☐ Other	
Home country		Street address					
Postal code		Post office				Country	
Email				Telephone		Certification	
						☐ Certification of the right to request a refund is enclosed.	

Representative

Representative's (a business entity) name as registered officially / Representative's (natural person's) last name				Representative's (natural person's) first and middle name			
ID code		ID type					
		☐ VAT number ☐ Tax registration number ☐ Other					
Street address							
Postal code		Post office				Country	
Email				Telephone		Letter of authorisation (power of attorney)	
						☐ Power of attorney is enclosed.	

Refund period

Period for your refund application: either one calendar month or an entire year.

mm/yyyy		yyyy	
☐ Month		☐ Year	



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Refund recipient's bank account (or other account to which the refund is to be paid)

Please note that your bank may collect a fee for the tax refund, based on their price list.

Bank account number		BIC or SWIFT	Clearing code
Account holder if other than refund recipient			Currency of the bank account
Full name of bank		Full address of bank	
Post number	Post office		Country

Products

Alcoholic drinks	Date purchased mm/yyyy	Contains alcohol by volume, %	Product quantity	Excise tax amount	
				€	c
Beer					
Spirits and mixed drinks containing spirits (e.g. vodka, whisky, liqueur and certain long drinks)					
Other alcoholic beverages (e.g. vermouth, bitters, port and sherry)					
Wine and other fermented beverages (e.g. cider and certain long drinks)					
Other alc. drinks, please specify					
Other alc. drinks, please specify					



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Products

Liquid fuels	Date purchased mm/yyyy	_____	Product quantity	Excise tax amount		
				€	c	
	Light fuel oil					
	Diesel fuel					
	Gasoline/petrol					
	Liquefied petroleum gas					
	Other liquid fuels, please specify					
	Other liquid fuels, please specify					
Other liquid fuels, please specify						
Electricity						
Excise duty category 1		_____				

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Products

Tobacco	Date purchased mm/yyyy	Retail price € c		Product quantity	Excise tax amount € c	
Cigarettes						
Cigars						
Cigarillos						
Pipe tobacco, and smoking tobacco						
Fine-cut rolling tobacco						
Smokeless nicotine products, non-liquid						
Electronic cigarette liquid containing nicotine		_____				
Electronic cigarette liquid without nicotine						
Heated tobacco products						
Heated tobacco products in liquid form						
Tobacco products, other						
Soft drinks						
Specify the category of soft drinks		_____				
Specify the category of soft drinks						
Specify the category of soft drinks						



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Products

Beverage containers	Date purchased mm/yyyy		Product quantity	Excise tax amount	
				€	c
Beverage container					
Other products					
Natural gas		—			
Biogas					
Biogas R					
Biogas T					
Other products subject to excise taxation, please specify					
Other products subject to excise taxation, please specify					
Other products subject to excise taxation, please specify					

Amount totals		
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I affirm that the above is true

Date	Signature	Name in print