



**ZIMBABWE REVENUE AUTHORITY  
CUSOMS AND EXCISE  
SPIRIT REBATE**

**Application for Authority to Obtain and Use Rebated Spirits**

- Notes:
- (i) After completion, this form should be sent to the nearest ZIMRA Office
  - (ii) Where formulae are required these should be submitted in triplicate on Form Ex. 41 and may be attached under confidential cover addressed to the Commissioner General or forward to him direct and the appropriate section of the form marked accordingly.

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**PART I (TO BE COMPLETED BY ALL APPLICANTS)**

- 1. Name of applicant .....
- 2. Trading Name (if any) .....
- 3. Postal Address.....
- 4. Address of premises where it is intended to store and use rebate spirits.....  
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- 5. Name of all members or partners or firm (not required in case of trader or limited company).....  
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- 6. Type of rebated spirit required.....
- 7. Purpose for which rebated spirits are required.....  
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- 8. Is there any substitute for ethyl alcohol for required purpose?.....  
If so, state reasons this is not to be used.....  
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- 9. Details of any manufacturing process involving use of rebate spirits.....  
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- 10. Estimated annual consumption of rebated spirits.....
- 11. Designation of person in control of manufacturing operations, and qualifications if medicinal preparations are to be manufactured  
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- 12. Designation of person who will control receipt/disposal of rebated spirits and details of proposed system to prevent theft or misuse of rebated spirits during manufacturing operations .....
- 13. Location and description of place where stocks of rebated spirits will be kept on premises.....
- 14. Is this place to be used solely for storage or rebated spirits?.....

If not, state other use(s) to which store will be put.....

15. ....

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PART III (TO BE COMPLETED BY APPLICANT FOR REBATED PLAIN SPIRITS OR ABSOLUTE ALCOHOL ONLY)

16. Formulae of all preparations (other than medical operations) to be manufactured with rebated spirits (see Note (ii) on preceding page)

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17. Are any of the following denatured spirits suitable? ..... If not, please give reasons:-

- (a) Plain spirits/absolute alcohol denatures with 1 percent v/v Diethyl phthaine
- (b) Industrial methylated spirits
- (c) Industrial methylated spirits (1<sup>st</sup> Quality)
- (d) Industrial methylated spirits (R grade)

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PART IV (TO BE COMPLETED BY ALL APPLICANTS)

18. I do hereby declare that I have acquainted myself with the Customs and Excise (Spirit Rebate) Regulations 1982 as amended, and understand that in the even of my application being approved I may be required to .....a bond in whatever amount my be considered necessary by the Controller of Customs and Excise.

I also declare that the information given above is to the best of my knowledge and belief true and correct.

Date.....

Signed.....

Designation .....

For .....

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PART V (FOR OFFICIAL USE - TO BE COMPLETED BY THE REGIONAL MANAGER)

19. Are you satisfied with security arrangements for storage of rebated spirits and use during manufacturing operations?.....

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20. Do you consider supervisor of manufacturing operations necessary to safeguard revenue? .....

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21. Do you recommend this application? ..... If not give reasons ( in separate report if necessary)

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22. Any other remarks

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Date.....

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For Regional Manager