

# GOVERNMENT OF WEST BENGAL FINANCE DEPARTMENT(REVENUE) DIRECTORATE OF COMMERCIAL TAXES

# THE WEST BENGAL GOODS AND SERVICES TAX RULES, 2017

(As on 31.01.2022)

# Notification No. 1068 –F.T. dated 21.06.2017 [ PART-II (Forms)

As amended by fo	llowing Notifications
Tis difference by 10.	nowing rounications
No. 1150-F.T. dated 29.06.2017	No. 1151-F.T. dated 29.06.2017
No. 1221-F.T. dated 06.07.2017	No. 1385-F.T. dated 01.08.2017
No. 1456-F.T. dated 17.08.2017	No. 1568-F.T. dated 30.08.2017
No. 1656-F.T. dated 18.09.2017	No. 1763-F.T. dated 10.10.2017
No. 1793-F.T. dated 13.10.2017	No. 1852-F.T. dated 18.10.2017
No. 1908-F.T. dated 30.10.2017	No. 2031-F.T. dated 15.11.2017
No. 2274-F.T. dated 21.12.2017	No. 2275-F.T. dated 21.12.2017
No. 2313-F.T. dated 29.12.2017	No. 117-F.T. dated 24.01.2018
No. 165-F.T. dated 05.02.2018	No. 281-F.T. dated 07.03.2018
No. 355-F.T. dated 23.03.2018	No. 518-F.T. dated 18.04.2018
No. 768-F.T. dated 13.06.2018	No. 836-F.T. dated 25.06.2018
No. 916-F.T. dated 06.07.2018	No. 1339-F.T. dated 13.09.2018
No. 1342-F.T. dated 13.09.2018	No. 1343-F.T. dated 13.09.2018
No. 1505-F.T. dated 12.10.2018	No. 1506-F.T. dated 12.10.2018
No. 1570-F.T. dated 02.11.2018	No. 1873-F.T. dated 27.12.2018
No. 1893-F.T. dated 31.12.2018	No. 173-F.T. dated 29.01.2019
No. 559-F.T. dated 29.03.2019	No. 679-F.T. dated 23.04.2019
No. 766-F.T. dated 08.05.2019	No. 1090-F.T. dated 28.06.2019
No. 1225-F.T. dated 19.07.2019	No. 1730-F.T. dated 16.10.2019
No. 1878-F.T. dated 22.11.2019	No. 2050-F.T. dated 23.12.2019
No. 2090-F.T. dated 31.12.2019	No. 40-F.T. dated 07.01.2020



No. 351- F.T. dated 05.03.2020	No. 443-F.T. dated 03.04.2020
No. 462- F.T. dated 15.04.2020	No. 492-F.T. dated 13.05.2020
No. 571-F.T. dated 30.06.2020	No. 598-F.T. dated 10.07.2020
No. 623-F.T. dated 21.07.2020	No. 654-F.T. dated 18.08.2020
No. 738-F.T. dated 14.09.2020	No. 843-F.T. dated 15.10.2020
No. 867-F.T. dated 04.11.2020	No. 937-F.T. dated 02.12.2020
No. 07-F.T. dated 04.01.2021	No. 67-F.T. dated 18.01.2021
No. 603-F.T. dated 03.06.2021	No. 607-F.T. dated 03.06.2021
No. 609-F.T. dated 03.06.2021	No. 641-F.T. dated 14.06.2021
No. 951 -F.T. dated 06.09.2021	No. 1002 -F.T. dated 14.09.2021
No. 1231-F.T. dated 21.10.2021	No. 1566-F.T. dated 10.12.2021
No. 1657-F.T. dated 23.12.2021	No. 36-F.T. dated 10.01.2022
No. 69-F.T. dated 18.01.2022	
No. 09-F.1. dated 18.01.2022	

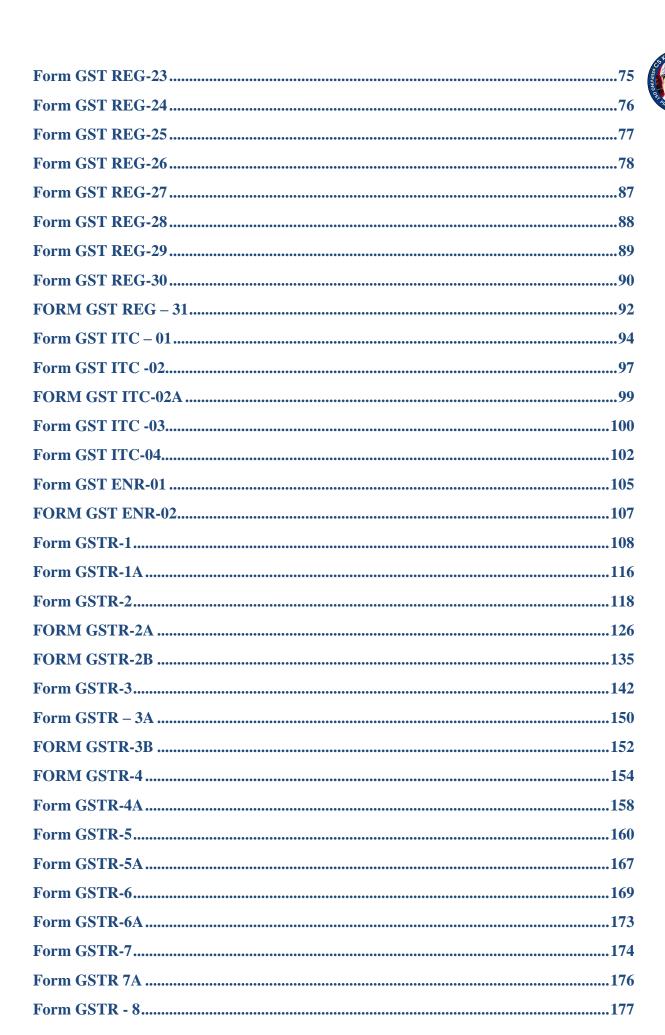
#### Disclaimer

While every care has been taken to provide accurate copy of the West Bengal Goods and Services Tax Rules, 2017 incorporating the subsequent amendments, the Directorate of Commercial Taxes, West Bengal will not be responsible for any typographical or any other error/inaccuracy in the above Rules. For clearing any doubt Notifications appearing in the Kolkata Gazette may be consulted.



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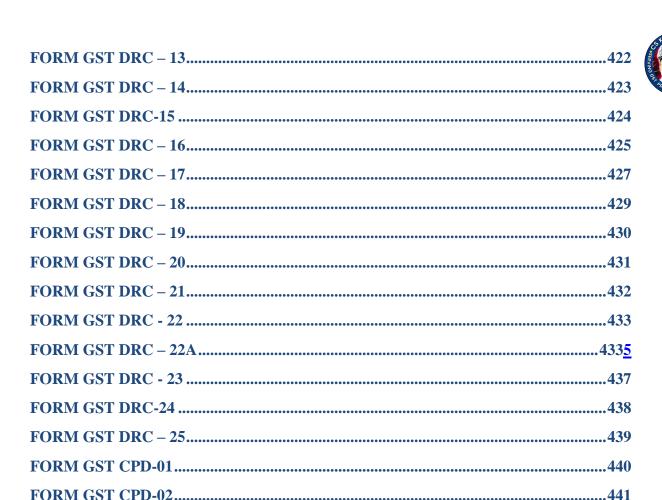
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# Form GST CMP -01

[See rule 3(1)]

Intimation to pay tax under section 10 (composition levy) (Only for persons registered under the existing law migrating on the appointed day)

1. GSTIN / Provisional ID								
2. Legal name								
3. Trade name, if any								
4. Address of Principal Place of Busines	SS							
5. Category of Registered Person < Sele	ect from dro	op down>						
(i) Manufacturers, other than manufacturers of such goods as notified by the Government								
(ii) Suppliers making supplies referred to in clause (b) of paragraph 6 of Schedule II								
(iii) Any other supplier eligible for	or composit	tion levy.						
6. Financial Year from which composition	on scheme	is opted	2017-18					
7. Jurisdiction	Centre		State					
8. Declaration –								
I hereby declare that the aforesaid bus specified for payment of tax under section		abide by the	he conditions and restrictions					
9. Verification								
I hereby solemnly affirm and declare that the information given hereinabove is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.								
		Signatur	re of Authorised Signatory					
			Name					
Place Date			Designation / Status					



# Form GST CMP -02

*\*[See rule 3(3) and rule 3(3A)]* 

# Intimation to pay tax under section 10 (composition levy) (For persons registered under the Act)

1. GSTIN					
2. Legal name					
3. Trade name, if any					
4. Address of Principal Place of Business					
5. Category of Registered Person < Select from	drop down>.				
(i) Manufacturers, other than manufacturers of notified by the Government	of such goods as ma	ay be			
(ii) Suppliers making supplies referred to paragraph 6 of Schedule II					
(iii) Any other supplier eligible for compo	osition levy.				
6. Financial Year from which composition schen	ne is opted				
7. Jurisdiction	Centre	State	е		
8. Declaration –  I hereby declare that the aforesaid business shall abide by the conditions and restrictions specified for paying tax under section 10.					
9. Verification					
I hereby solemnly affirm and declare that the information given hereinabove is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.					
Signature of Authorised Signatory					
	Na	me			
Place Date	Des	ignatio	on / Status		



### Form GST -CMP-03

[See rule 3(4)]

# Intimation of details of stock on date of opting for composition levy

(Only for persons registered under the existing law migrating on the appointed day)

1. GSTIN			
2. Legal name			
3. Trade name, if any			
4. Address of Principal Place of Business			
5 Details of application filed to pay toy	(i) Application re	ference	
5. Details of application filed to pay tax under section 10	number (ARN)		
under section 10	(ii) Date of filing		
6. Jurisdietion	Centre	State	
-			

7. Stock of purchases made from registered person under the existing law

Sr.	GSTIN/TI	Name of	Bill/	Date	Value of	VAT	Centr	Servic	Total
No	N	the supplier	Invoic		Stock		al	e Tax	
			e No.				Excis	(if	
							e	applic	
								able)	
1	2	3	4	5	6	7	8	9	10
1									
2									
Total									

8. Stock of purchases made from unregistered person under the existing law

Sr.	Name of	Addres	Bill/	Date	Value of	VAT	Centr	Servic	Total
No	the unregistere d person	S	Invoice No		Stock		al Excis e	e Tax (if applic able	
1	2	3	4	5	6	7	8	9	
1									

2										*SERVING G	100
Total										PRA	271
								II.	1		
9. De	etails of tax paid	Descripti	on	Central	l Tax	State 7 UT Ta					
		Amount									
		Debit entry no.									
10. Ver	ification										
	information ief and nothin	_			d corre				declare nowledge		
		Signature of Authorised Signatory									
DI		Name								ı	
Place Date		Designation / Status									



#### Form GST - CMP-04

[See rule 6(2)]

# **Intimation/Application for Withdrawal from Composition Levy**

1. GSTIN						
2. Legal name						
3. Trade name, if any						
4.Address of Principal Place of busing	ness					
<sup>#</sup> [5. Category of Registered Person						
(i) Manufacturers, other than ma						
such goods as may be notifie	d by the					
Government						
(ii) Suppliers making supplies re clause (b) of paragraph 6 of S						
(iii) Any other supplier eligible f composition levy.]	or					
6. Nature of Business						
7. Date from which withdrawal from	composition so	cheme is				
sought	composition so		DD	MM	YYYY	
8. Jurisdiction	Centre		State			
9. Reasons for withdrawal from com	position					
scheme						
10. Verification						
I		hereby solemnl	y affirn	and de	eclare that	
the information given hereinabove is		•	•			
and nothing has been concealed there			J	C		
		nature of Authorised Signatory				
		1	Name			
Place		1	, willo			
Date						
Date		Designa	tion / St	atus		

Note – Stock statement may be furnished separately for availing input tax credit on the stock available on the date preceding the date from which composition option is withdrawn in **FORM GST ITC -01**.

<sup>\*</sup>Substituted by Notification No. 1150-F.T. dated 29.06.2017 w.e.f. 22.06.2017.



# Form GST CMP- 05

[See rule 6(4)]

Reference No. << >>	<< Date >>
То	
GSTIN Name Address	
Notice for denial of opt	ion to pay tax under section 10
violated the conditions and restrictions nunder section 10 of the Act. I therefore prosaid section for the following reasons: - 1	h has come to my notice, it appears that you have ecessary for availing of the composition scheme pose to deny the option to you to pay tax under the
2 3	
\[ \text{You are hereby directed to furnish a rep} \] the date of service of this notice.	ly to this notice within fifteen working days from
☐ You are hereby directed to appear before	e the undersigned on DD/MM/YYYY at HH/MM.
· · · · · · · · · · · · · · · · · · ·	ulated date or fail to appear for personal hearing or ill be decided ex parte on the basis of available
	G
	Signature
	Name of Proper Officer
	Designation
	Jurisdiction
Place Date	



# Form GST CMP - 06

[See rule 6(5)]

# Reply to the notice to show cause

1.	GSTIN	
2.	Details of the show cause notice	Reference no. Date
3.	Legal name	
4.	Trade name, if any	
5.	Address of the Principal Place of Business	
6.	Reply to the notice	
7.	List of documents uploaded	
8.	Verification	I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.  Signature of the Authorised Signatory  Date Place

Note -

1. The reply should not be more than 500 characters. In case the same is more than 500 characters, then it should be uploaded separately.



2. Supporting documents, if any, may be uploaded in PDF format.

Form G	GST CMP-07
[See	rule 6(6)]
Reference No. <<>>>	Date-
То	
GSTIN Name Address	
Application Reference No. (ARN)	Date –
Order for acceptance / rejec	ction of reply to show cause notice
vide reference no dated	filed in response to the show cause notice issued Your reply has been examined and the same has ore, your option to pay tax under composition notice stands vacated.
	or
vide reference no dated	filed in response to the show cause notice issued Your reply has been examined and the same has efore, your option to pay tax under composition <>>> for the following reasons:
< <text>&gt;</text>	
	or
☐ You have not filed any reply to the s	how cause notice; or
☐ You did not appear on the day fixed	for hearing.
Therefore, your option to pay tax under comfrom << date >> for the following reasons	sposition scheme is hereby denied with effect s:
<< Text >>	

Signature

Date

Name of Proper Officer

Financial Year



Place Designation Jurisdiction

# **#Form GST CMP - 08**

[See rule 62]

# Statement for payment of self-assessed tax

			Quarter
1.	GS	ΓΙΝ	
2.	(a)	Legal name	<auto></auto>
	(b)	Trade name	<auto></auto>
	(c)	ARN	<auto> (After filing)</auto>
	(d)	Date of filing	<auto> (After filing)</auto>

### 3. Summary of self-assessed liability

(net of advances, credit and debit notes and any other adjustment due to amendments etc.)

(Amount in ₹in all tables)

Sr.	Description	Value	Integrated	Central	State/ UT	Cess
No.			tax	tax	tax	
1	2	3	4	5	6	7
1.	Outward supplies					
	(including exempt					

	supplies)			
2.	Inward supplies attracting reverse charge including import of services			
3.	Tax payable (1+2)			
4.	Interest payable, if any			
5.	Tax and interest paid			

# S SERVING OF ARACITMONETO

#### 4. Verification

I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.

	Signature
Place:	Name of Authorised Signatory
Date:	Designation/Status

#### **Instructions:**

- 1. The taxpayer paying tax under the provisions of section 10 of the West Bengal Goods and Services Tax Act, 2017 or by availing the benefit of notification No. 377-F.T., dated the 7th March, 2019 shall make payment of tax on quarterly basis by the due date.
- 2. Adjustment on account of advances, credit/debit notes or rectifications shall be reported against the liability.
- 3. Negative value may be reported as such if such value comes after adjustment.
- 4. If the total tax payable becomes negative, then the same shall be carried forward to the next tax period for utilising the same in that tax period.
- 5. Interest shall be leviable if payment is made after the due date.
- 6. 'Nil' Statement shall be filed if there is no tax liability due during the quarter.

# Inserted by Notification No. 679-F.T. dated 23.04.2019 w.e.f. 23.04.2019.



#### Form GST REG-01

[See rule 8(1)]

#### **Application for Registration**

(Other than a non-resident taxable person, a person required to deduct tax at source under section 51 and a person required to collect tax at source under section 52 and a person supplying online information and database access or retrieval services from a place outside India to a non-taxable online recipient referred to in section 14 of the Integrated Goods and Services Tax Act, 2017)

#### Part -A

			State /UT $- \bigvee$ District - $\bigvee$							
(i)	(i) Legal Name of the Business:									
	(As mentioned in Permanent Account Number)									
(ii)	Permanent Account Number	:								
	(Enter Permanent Account Number of the Business; Permanent Account Number of Individual in case of Proprietorship concern)									
(iii)	Email Address:									
(iv)	Mobile Number:									
Note	- Information submitted above	e is s	ubject to online verification before proceeding to fill up Part-B.	$\neg$						
Aut	horised signatory filing the ap	plica	tion shall provide his mobile number and email address.							
			Part –B							
1.	Trade Name, if any									
2.	Constitution of Business (P.	lease	Select the Appropriate)							
(i) P1	oprietorship		(ii) Partnership							
(iii) l	Hindu Undivided Family		(iv) Private Limited Company							
(v) P	ublic Limited Company		(vi) Society/Club/Trust/Association of Persons							
(vii)	Government Department		(viii) Public Sector Undertaking							
(ix) Unlimited Company			(x) Limited Liability Partnership							
(xi) I	Local Authority		(xii) Statutory Body							
` ′	Foreign Limited Liability tership		(xiv) Foreign Company Registered (in India)							

(xv) Oth	ers (Please specify)								*SERVING	
3.	Name of the State			District				<b></b>	S. A. A. C. TITION	
4.	Jurisdiction		Sta	ite			Centre			
		Sector, Circl		ard, Unit,	etc.					
		others (speci		· · · · ·						
5.	Option for Composition	Yes		No 🗆						
I hereby	omposition Declaration declare that the aforesaid e rules for opting to pay tax			-		s and rest	rictions	specif	ied in the	
6.1 Categ	gory of Registered Person<	tick in check	box	>						
(i) Manufacturers, other than manufacturers of such goods as may be notified by the Government for which option is not available										
(ii) Suppliers making supplies referred to in clause (b) of paragraph 6 of Schedule II										
(iii)	Any other supplier eligible	e for composit	tion ]	levy.						
7.	Date of commencement of	of business		DD/MM/	YYYY					
8.	Date on which liability to	register arise	es	S DD/MM/YYYY						
9.	Are you applying for regicasual taxable person?		Yes	No						
10.	If selected 'Yes' in Sr. No which registration is requ	or	From DD/MM/	To DD/MM/YYYY						
11.	If calcuted 'Vee' in Sr. N.	a O actimata	dans							
	If selected 'Yes' in Sr. No period of registration		u sup	pries and e	stimated	i net tax i				
Sr. No.	Type of Tax		Tur	Turnover (Rs.)				Net Tax Liability (Rs.)		
(i)	Integrated Tax									
(ii)	Central Tax									
(iii)	State Tax									
(iv)	UT Tax									
(v)	Cess									
	Total									
	Payment Details									
	Challan Identification Number			Date			Amount	t		
<sup>##</sup> [12.	Are you applying for reginal SEZ Unit?	stration as a		Yes			No			

	(i) Select name of SEZ			S S S S S S S S S S S S S S S S S S S				
	(ii) Approval order number and date of order			1	<sup>Q</sup> ARCTITION			
	(iii) Period of validity	From	DD/MM/YYYY	То	DD/MM/YYYY			
	(iv) Designation of approving authority							
13.	Are you applying for registration as a SEZ Developer?	Yes		No				
	(i) Select name of SEZ Developer			$\nabla$				
	(ii) Approval order number and date of order							
	(iii) Period of validity	From	DD/MM/YYYY	То	DD/MM/YYYY			
	(iv) Designation of approving authority				]			
14.	Reason to obtain registration:			·				
	(i) Crossing the threshold	(viii) Merger /amalgamation of two or more registered persons						
	(ii) Inter-State supply		out Service Distribu					
	(iii) Liability to pay tax as recipient of goods or services u/s 9(3) or 9(4)	(x) Per	son liable to pay tax	x u/s 9(	5)			
	(iv) Transfer of business which includes	(xi) Ta	xable person supply	ing thr	ough e-			
	change in the ownership of business	Comm	erce portal					
	(if transferee is not a registered entity)	(xii) Voluntary Basis						
	<ul><li>(v) Death of the proprietor</li><li>(if the successor is not a registered entity)</li></ul>	(XII) Voluntary Basis						
	(vi) De-merger	(xiii) Persons supplying goods and/or services on						
		behalf of other taxable person(s)						
	(vii) Change in constitution of business	(xiv) C	thers (Not covered	above)	- Specify			
15.	Indicate existing registrations wherever app	plicable						
Registra	ntion number under Value Added Tax							
Central	Sales Tax Registration Number							
Entry Ta	ax Registration Number							
Entertai	nment Tax Registration Number							
Hotel ar	nd Luxury Tax Registration Number							
Central I	Excise Registration Number							
Service 7	Tax Registration Number							
-	tte Identify Number/Foreign Company tion Number							
	Liability Partnership Identification Foreign Limited Liability Partnership							

Identification Number											SERVING GS
Importer/Exporter Cod											PACTITIONE
Registration number under Medicinal and Toilet Preparations (Excise Duties) Act											
Registration number under Shops and Establishment Act											
Temporary ID, if any											
Others (Please specify	)										
16. (a) Address o	f Principal	l Pla	ace of Busin	iess							
Building No./Flat No.					Fle	oor No.					
Name of the Premises	Building				Ro	oad/Street					
City/Town/Locality/V	illage				Di	istrict					
Taluka/Block											
State					PI	N Code					
Latitude					Lo	ongitude					
(b) Contact Information	n										
Office Email Address				Offic num	te Telephone ST D						
Mobile Number				Offic	ce F	ee Fax Number ST D					
(c) Nature of premises				I						L	
Own	Leased		Rented	l		Consent Sh			Shared Others (spec		ify)
(d) Nature of business	activity b	eing	g carried out	t at ab	ove	mentione	ed pr	emi	ses (Ple	ease tick applicab	le)
Factory / Manufacturin	ng 🗆		Wholesale Business				Ret	ail I	Busines	ss	
Warehouse/Depot			Bonded Warehouse	e			Supplier of services				
Office/Sale Office			Leasing Bu	usines	S		Rec	cipie	ent of g	oods or services	
EOU/ STP/ EHTP			Works Co	ntract			Exp	ort			
Import   Others (Specify			ecify)								
17. Details of Bank Ac	counts (s)	)									
Total number of Ban business	Account	ts m	aintained by	y the a	ppl	icant for o	cond	ucti	ng		
(Upto 10 Bank Accou	ents to be	repo	orted)								

Details of Bank Account 1

<b>A</b>		<del></del>										
	unt Number											ERVING GS
	of Account						IFSC					TRA
Bank	Name											
Branc	ch Address	To be au	ıto-pop	oulate	d (Ed	it mo	de)					
Note	– Add more ac	counts										
18. De:	tails of the Goo	ods supplied	d by th	e Bus	iness							
	e specify top 5											
Sr.	Description					I	ISN Coo	de (For	ır dioi	f)		
No.	Description	or Goods					ior co	uc (1 0t	ii digi	ι)		
(i)												
(ii)												
•••												
(v)												
Please	e specify top 5	Services										
Sr. No.	Description	of Service	es			F	ISN Co	de (Fou	ır digi	t)		
(i)												
(ii)												
•••												
(v)												
20. De	etails of Addition	onal Place(s	s) of B	usine	SS							
Numb	per of additiona	l places										
Premis	es 1											
	Details of Add	litional Pla	ce of B	Busine	ess							
	ing No/Flat No						F	loor No	0			
	e of the Premise		,				R	oad/St	reet			
	Γown/Locality/						T	District				
	Town/Locanty/ Taluka	v mage					L	1811Ct				
State	A I aiuna						<i>D</i>	IN Coc	10		<u> </u>	
siale				1			P	$\mu \nu C00$	IC.			l I

Latitude				Longitude			ude				*SERVING
(b) Contact Inform	nation		<b>.</b>					Į.			
Office Email Address				Office Telephone number			number	STD	)		
Mobile Number			Office	Fax	Numb	er	STD	)			
(c) Nature of prem	nises										
Own Leased F			Rented	Со	onse	Sent Shared			ored Other (speci		y)
(d) Nature of busin	ness activity	being c	arried out a	at above	mer	ntioned	l premises	s (Plea	ase ti	ck appl	icable
Factory / Manufac	turing		Wholesale	e Busine	SS		Retail B	usine	SS		
Warehouse/Depot			Bonded V	Varehous	se		Supplier	r of se	ervice	es	
Office/Sale Office			Leasing B	Business			Recipient of goods or services			s or	
EOU/ STP/ EHTP			Works Co	ontract			Export				
Import			Others (sp	pecify)							
Particulars Name Photo		First	Name	M	liddl	le Nam	ne	Last	Nam	e	
Name of Father	r										
Date of Birth		DD/	MM/YYY	Y Gender				<male, female,<br="">Other&gt;</male,>			
Mobile Numbe	r			Email address			ss				
Telephone No.	with STD										
Designation /Status					Director Identification Num (if any)						
Permanent Acc Number	Permanent Account Number			Aadha	ar N	Number	r				
Are you a citize	en of India?	Yes	/ No	Passpo		,	case of				
Residential Ad	dress	1		1					1		
Building No/Fl	at No			Floor	No						
Name of the				Road/9	Stree	et					

Premises/Building		
City/Town/Locality/Village	District	
Block/Taluka		
State	PIN Code	
Country (in case of foreigner only)	ZIP code	

Premises/Building		
City/Town/Locality/Village	District	
Block/Taluka		
State	PIN Code	
Country (in case of foreigner only)	ZIP code	

Checkbox for Prima Details of Signator	ary Authorised Sign	atory	
Particulars	First Name	Middle Name	Last Name
Name			
Photo			
Name of Father			
Date of Birth	DD/MM/YYYY	Gender	<male, female,="" other=""></male,>
Mobile Number		Email address	

Designation /Status		Director Identification Number (if any)	
Permanent Account Number		Aadhaar Number	
Are you a citizen of India?	Yes / No	Passport No. (in case of foreigners)	
Residential Addres			
Building No/Flat N	N()	Floor No	

Building No/Flat No	Floor No			
Name of the Premises/Building	Road/Street			
Block/Taluka				
City/Town/Locality/Village	District			
State	PIN Code			

# 23. Details of Authorised Representative

22. Details of Authorised Signatory

Telephone No. with

STD

Enrolment ID, if available											*SERVING O	ARACTITIONER <sup>C</sup>
Provide following details, i	if enrol	ment	ID is	not av	ailabl	e						
Permanent Account												
Number												
Aadhaar, if Permanent												
Account Number is not												
available												
	First N	Vame		Mide	dle Na	me		Last	Name	e		
Name of Person												
Designation / Status												
Mobile Number												
Email address												
Telephone No. with STD					FAX	No. v	with S	TD				·

#### 24. State Specific Information

Profession Tax Enrolment Code (EC) No.

Profession Tax Registration Certificate (RC) No.

State Excise License No. and the name of the person in whose name Excise License is held

(a)	Field I
<i>(b)</i>	Field 2
(c)	
(d)	
(e)	Field n

#### 25. Document Upload

A customized list of documents required to be uploaded (refer rule 8) as per the field values in the form.

#### 26. Consent

I on behalf of the holder of Aadhaar number refilled based on Aadhaar number provided
in the form> give consent to "Goods and Services Tax Network" to obtain my details from
UIDAI for the purpose of authentication. "Goods and Services Tax Network" has informed
me that identity information would only be used for validating identity of the Aadhaar holder
and will be shared with Central Identities Data Repository only for the purpose of
authentication.

#### 27. Verification (by authorised signatory)

I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom

# Signature



Place:	Name of Authorised Signatory
Date:	Designation/Status

LIST OF	accuments to be uploaded:-
1.	Photographs (wherever specified in the Application Form)
	(a) Proprietary Concern – Proprietor
	(b) Partnership Firm / Limited Liability Partnership — Managing/Authorised/Designated Partners (personal details of all partners are to be submitted but photos of only ten partners including that of Managing Partner are to be submitted)
	(c) Hindu Undivided Family – Karta
	(d) Company – Managing Director or the Authorised Person
	(e) Trust – Managing Trustee
	(f) Association of Persons or Body of Individuals –Members of Managing Committee (personal details of all members are to be submitted but photos of only ten members including that of Chairman are to be submitted)
	(g) Local Authority – Chief Executive Officer or his equivalent
	(h) Statutory Body – Chief Executive Officer or his equivalent
	(i) Others – Person in Charge
2.	Constitution of Business: Partnership Deed in case of Partnership Firm, Registration Certificate/Proof of Constitution in case of Society, Trust, Club, Government Department, Association of Persons or Body of Individuals, Local Authority, Statutory Body and Others etc.
3.	Proof of Principal Place of Business:
	(a) For Own premises –
	Any document in support of the ownership of the premises like latest Property Tax Receipt or Municipal Khata copy or copy of Electricity Bill.
	(b) For Rented or Leased premises –
	A copy of the valid Rent / Lease Agreement with any document in support of the ownership of the premises of the Lessor like Latest Property Tax Receipt or Municipal Khata copy or copy of Electricity Bill.
	(c) For premises not covered in (a) and (b) above –
	A copy of the Consent Letter with any document in support of the ownership of the premises of the Consenter like Municipal Khata copy or Electricity Bill copy. For shared properties also, the same documents may be uploaded.
	(d) For rented/leased premises where the Rent/lease agreement is not available, an affidavit to that effect along with any document in support of the possession of the

	premises like copy of Electricity Bill.
	(e) If the principal place of business is located in a Special Economic Zone or the applicant is an Special Economic Zone developer, necessary documents/certificates issued by Government of India are required to be uploaded.
4	Bank Account Related Proof <sup>&amp;</sup> [where details of such Account are furnished:]
	Scanned copy of the first page of Bank passbook or the relevant page of Bank Statement or Scanned copy of a cancelled cheque containing name of the Proprietor or Business entity, Bank Account No., MICR, IFSC and Branch details including code.
5	Authorisation Form:-
	For each Authorised Signatory mentioned in the application form, Authorisation or copy of Resolution of the Managing Committee or Board of Directors to be filed in the following format:
	Declaration for Authorised Signatory (Separate for each signatory) (Details of Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc.)
	I/We (name) being (Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc.) of (name of registered person)
	hereby solemnly affirm and declare that < <name (status="" authorised="" designation)="" of="" signatory,="" the="">&gt; is hereby authorised, vide resolution no dated (copy submitted herewith), to act as an authorised signatory for the business &lt;<goods -="" and="" business="" identification="" name="" number="" of="" services="" tax="" the="">&gt; for which application for registration is being filed under the Act. All his actions in relation to this business will be binding on me/ us.</goods></name>
	Signature of the person competent to sign
	Name:
	Designation/Status:
	(Name of the proprietor/Business Entity)
	Acceptance as an authorised signatory  I <<(Name of the authorised signatory>> hereby solemnly accord my acceptance to act as authorised signatory for the above referred business and all my acts shall be binding on the business.
	Place: Signature of Authorised Signatory (Name)
	Date:  Designation/Status:



#### Instructions for submission of Application for Registration.

- 1. Enter name of person as recorded on Permanent Account Number of the Business. In case of Proprietorship concern, enter name of proprietor against Legal Name and mention Permanent Account Number of the proprietor. Permanent Account Number shall be verified with Income Tax database.
- 2. Provide E-mail Id and Mobile Number of authorised signatory for verification and future communication which will be verified through One Time Passwords to be sent separately, before filling up Part-B of the application.
- 3. Applicant need to upload scanned copy of the declaration signed by the Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc. in case the business declares a person as Authorised Signatory.
- 4. The following persons can digitally sign the application for new registration: -

Constitution of Business	Person who can digitally sign the application
Proprietorship	Proprietor
Partnership	Managing / Authorised Partners
Hindu Undivided Family	Karta
Private Limited Company	Managing / Whole-time Directors
Public Limited Company	Managing / Whole-time Directors
Society/ Club/ Trust/ AOP	Members of Managing Committee
Government Department	Person In charge
Public Sector Undertaking	Managing / Whole-time Director
Unlimited Company	Managing/ Whole-time Director
Limited Liability Partnership	Designated Partners
Local Authority	Chief Executive Officer or Equivalent
Statutory Body	Chief Executive Officer or Equivalent
Foreign Company	Authorised Person in India
Foreign Limited Liability Partnership	Authorised Person in India
Others (specify)	Person In charge

- 5. Information in respect of authorised representative is optional. Please select your authorised representative from the list available on the common portal if the authorised representative is enrolled, otherwise provide details of such person.
- 6. State specific information are relevant for the concerned State only.
- 7. Application filed by undermentioned persons shall be signed digitally: -

Sr. No	Type of Applicant	Type of Signature required
--------	-------------------	----------------------------



Sr. No	Type of Applicant	Type of Signature required		
1.	Private Limited Company Public Limited Company Public Sector Undertaking Unlimited Company Limited Liability Partnership Foreign Company Foreign Limited Liability Partnership	Digital Signature Certificate (DSC)- Class-2 and above.		
2.	Other than above	Digital Signature Certificate class 2 and above e-Signature or any other mode as may be notified		

- 8. All information related to Permanent Account Number, Aadhaar, Director Identification Number, Challan Identification Number shall be validated online by the system and Acknowledgment Receipt Number will be generated after successful validation of all the filled up information.
- 9. Status of the application filed online can be tracked on the common portal by entering Application Reference Number (ARN) indicated on the Acknowledgment.
- 10. No fee is payable for filing application for registration.
- 11. Authorised signatory shall not be a minor.
- 12. Any person having multiple \*[places of business] within a State, requiring a separate registration for any of its \*[places of business] business verticals shall need to apply separately in respect of each of the \$[places of business].
- 13. After approval of application, registration certificate shall be made available on the common portal.
- 14. Temporary Reference Number (TRN) will be allotted after successfully furnishing preliminary details in PART –A of the application which can be used for filling up details in PART-B of the application. TRN will be available on the common portal for a period of 15 days.
- 15. Any person who applies for registration under rule 8 may give an option to pay tax under section 10 in Part B of FORM GST REG-01, which shall be considered as an intimation to pay tax under the said section.
- \*[16. Government departments applying for registration as suppliers may not furnish Bank Account details.]
- \*\*[17. Taxpayers who want to pay tax by availing benefit of notification No. 377-F.T. dated 07.03.2019, as amended, shall indicate such option at serial no. 5 and 6.1(iii) of this Form.]

<sup>&</sup>lt;sup>#</sup> Inserted by Notification No. 1456-F.T. dated 17.08.2017 w.e.f. 22.06.2017.

<sup>\*</sup> Subs. by Notification No. 173-F.T. dated 29.01.2019 w. e. f. 01.02.2019 for "business verticals".

<sup>\$</sup> Subs. by Notification No. 173-F.T. dated 29.01.2019 w. e. f. 01.02.2019 for "vertical".

<sup>\*\*</sup> Inserted by Notification No. 679-F.T. dated 23.04.2019 w.e.f. 23.04.2019.

<sup>&</sup>lt;sup>&</sup> Inserted by notification No. 1090-F.T. dated 28.06.2019 w.e.f. 28.06.2019.

<sup>##</sup> Substituted by notification No. 40-F.T. dated 07.01.2020 w.e.f. 01.01.2020.

[See rule 8(5)]



# Acknowledgment

Application Reference	ce Number (ARN) -
You have filed the apunder:	pplication successfully and the particulars of the application are given as
Date of filing	:
Time of filing	:
Goods and Services	Γax Identification Number, if available :
Legal Name	:
Trade Name (if appli	cable):
Form No.	:
Form Description	:
Center Jurisdiction	:
State Jurisdiction	:
Filed by	:
Temporary reference	number (TRN), if any:
Payment details*	: Challan Identification Number
	: Date
	: Amount
It is a system generat	ed acknowledgement and does not require any signature.
* Applicable only in	case of Casual taxable person and Non Resident taxable person

[See rule 9(2)]



То	
Name of the Applicant:	
Address:	
GSTIN (if available):	
Application Reference No. (ARN): Date:	
Notice for Seeking Additional Information / Clarification / Documents relating to Application for << Registration/Amendment/Cancellation >>	
This is with reference to your < <registration amendment="" cancellation="">&gt; application fit vide ARN &lt;&gt; Dated -DD/MM/YYYY The Department has examined your application and not satisfied with it for the following reasons:  1.  2.  3.</registration>	
☐ You are directed to submit your reply by (DD/MM/YYYY)  ☐ *You are hereby directed to appear before the undersigned on (DD/MM/YYYY) (HH:MM)	) at
If no response is received by the stipulated date, your application is liable rejection. Please note that no further notice / reminder will be issued in this matter	for
Signature Name of the Proper Officer: Designation: Jurisdiction:	9

 $* \ Not \ applicable \ for \ New \ Registration \ Application$ 

[See rule 9(2)]



# Clarification/additional information/document for<<Registration/Amendment/Cancellation>>

1.	Notice details	Reference No.		Date	
2.	Application details	Reference No		Date	
3.	GSTIN, if applicable				
4.	Name of Business (Legal)				
5.	Trade name, if any				
6.	Address				
7.	Whether any modifica	ation in the applica	tion for regi	stration or fields	Yes $\square$
	is required				No □
					(Tick one)
8.	Additional				
	Information				
9.	List of Documents uploaded				
10.	Verification				
	I hereby solemnly affirm and declare that the information given hereinabove is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.				
				Signature of A	Authorised Signatory
					Name
	Designation/Status:				
	Place:				
	Date:				

#### Note:-

- 1. For new registration, original registration application will be available in editable mode if option 'Yes' is selected in item 7.
- 2. For amendment of registration particulars, the fields intended to be amended will be available in editable mode if option 'Yes' is selected in item 7.

[See rule 9(4)]



Reference Number:	Date-
To Name of the Applicant Address - GSTIN (if available)	
Order of Rejection of Application	for <registration amendment="" cancellation=""></registration>
	reply filed vide ARN dated The reply has been found to be satisfactory for the following reasons:
Or You have not replied to the notice i	ejected in accordance with the provisions of the Act.  ssued vide reference no dated within the our application is hereby rejected in accordance with the
	Signature Name
	Designation Jurisdiction





[See rule 10(1)]

**Registration Certificate**Registration Number: < *GSTIN/UIN* >

- 6						
1.	Legal Name					
2.	Trade Name, if any					
3.	Constitution of Business					
4.	Address of Principal Place of Business					
5.	Date of Liability	DD/MM/ YYYY				
6.	Period of Validity  (Applicable only in case of Non-Resident taxable person or Casual taxable person)	From	DD/MM/YYYY	То	DD/MM/YY YY	
7.	Type of Registration			•	•	
8.	8. Particulars of Approving Authority					
Centre		State				
		S	ignature			
Name	e					
Desig	gnation					
Offic	e					
9. D	ate of issue of Certificate	2				
	The registration certific	cate is required	to be prominently displa	yed at all p	laces of business	



#### Annexure A



# **Details of Additional Places of Business**

Goods and Services Tax Identification Number

Legal Name

Trade Name, if any

Total Number of Additional Places of Business in the State

Sr. No. Address

1

2

3

. . .

# L. A. AGRAINA, SUCCESSION OF ARACTITIONERS

## Annexure B



Goods and Services Tax Identification Number

Legal Name

Trade Name, if any

Details of <Proprietor / Partners / Karta / Managing Director and whole-time Directors / Members of the Managing Committee of Association of Persons / Board of Trustees etc.>

1.		Name
	Photo	Designation/Status
		Resident of State
2.		Name
	Photo	Designation/Status
		Resident of State
3.		Name
	Photo	Designation/Status
		Resident of State
4.		Name
	Photo	Designation/Status
		Resident of State
5.		Name
	Photo	Designation/Status
		Resident of State
6.		Name
	Photo	Designation/Status
		Resident of State

7.		Name
	Photo	Designation/Status
		Resident of State
8.		Name
	Photo	Designation/Status
		Resident of State
9.		Name
	Photo	Designation/Status
		Resident of State
10.		Name
	Photo	Designation/Status
		Resident of State



[See rule 12(1)]



## Application for Registration as Tax Deductor at source (u/s 51) or Tax Collector at source (u/s 52)

State /UT- District -

## Part -A

(i)	Legal Name of the Tax De Permanent Account Numb Number)		`			
(ii)	Permanent Account Numb  (Enter Permanent Account Number of Individual in ca	Numb			Account	
(iii)	Tax Deduction and Collect	tion Ac	ccount Number			
	(Enter Tax Deduction and Account Number is not available)			er, if Perm	nanent	
(iv)	Email Address					
(v)	Mobile Number					
Note -	Information submitted above	e is sub	pject to online verific	cation befo	ore proceeding to fill up	Part-B.
			Part –B			
1	Trade Name, if any					
2	Constitution of Business (I	Please	Select the Appropria	ite)		
(i) Prop	prietorship		(ii) Partnership			
(iii) Hi	ndu Undivided Family		(iv) Private Limit	ted Compa	any	
(v) Pub	lic Limited Company		(vi) Society/Club/	Trust/Ass	ociation of Persons	
(vii) G	overnment Department		(viii) Public Sector	or Underta	king	
(ix) Un	limited Company		(x) Limited Liabil	lity Partne	rship	
(xi) Lo	cal Authority		(xii) Statutory Bo	dy		
(xiii) F Partner	oreign Limited Liability ship		(xiv) Foreign Cor	npany Reg	gistered (in India)	
(xv) O	thers (Please specify)					
3	Name of the State	_	1	Distric	et 🛕	
4	Jurisdiction -	Sta	te		Centre	
			tor /Circle/ Ward arge/Unit etc.			
5	Type of registration	•		Tax Ded	luctor O Tax Collecto	or O

6.	Government	(Centre	/ State/Union	Territory)		Cente	er 🔾		State/UT	SERVING G
7.	Date of liability to deduct/collect tax		DD/MM/Y	YYYY					прасти	
8.	(a) Address of	f princip	oal place of b	usiness						
Buildir	ng No./Flat No				Floor 1	No.				
Name o	of the Premise	s/Buildin	ng		Road/S	Street				
City/To	own/Locality/	Village			Distric	t				
Block/	Taluka									
Latitud	le				Longit	ude				
State					PIN Co	ode				
(b) Cor	ntact Informati	on							ı	
Office	Email Address	3		Office Telephone number						
Mobile	Number			Office Fax Number						
(c)	Nature of pos	ssession	of premises							
	Own	L	eased	Rented	Coı	nsent	Shared	O	thers(spec	cify)
9.	Have you obtained registrations Services Tax	under G	oods and		Yes		N	lo 🗀		
10	If Yes, ment Services Tax Number									
11	IEC (Importe if applicable		er Code),							
12	Details of DI tax/collecting		wing and Dis	bursing Off	icer) / F	Person r	esponsible	for dedu	icting	
Particu	lars									
Name			First Name		Midd	lle Nam	ie	Last N	Vame	
Father'	's Name				<b>.</b>			1		
Photo										
Date of	f Birth		DD/MM/Y	YYY	Gen	der		<mal Other</mal 	e, Female >	,
Mobile	Number			Email address						
Teleph	one No. with S	STD								

Designation /Status	1		Director Identification I any)	Number (if	SERVINO OS REAL
Permanent Account Number	t		Aadhaar Number		
Are you a citizen of	f India?	Yes / No	Passport No. (in case o Foreigners)	ıf	
Residential Address	S				
Building No/Flat N	0		Floor No		
Name of the Premises/Building			Locality/Village		
State			PIN Code		
*[12A. Details of B  Total number of applicant (Upto applicant)  Details of Bank Account  Number  Type of Account  Bank Name  Branch	f Bank A 10 Bank A count 1	accounts mai	intained by the pe reported)  IFSC		
Address	10 00 00.	о рорилисс	(Luit mode)		
Note-Add more bar 13. Details of Auth Checkbox for Prima Details of Signatory	norised Sig ary Autho	gnatory	ory 🗀		
Particulars	•	rst Name	Middle Name	Last Name	
Name					
Photo					
Name of Father					

Date of Birth	DD/MM/YY YY	Gender		<male, f<="" th=""><th>Fema</th><th>le, O</th><th>ther&gt;</th><th>&gt;</th><th></th><th>SERVING GST AR</th></male,>	Fema	le, O	ther>	>		SERVING GST AR
Mobile Number		Email ad	dress							
Telephone No. with STD		1		1						
Designation /Status			Director Identif Number (if any							
Permanent Account Number			Aadhaar Numb	er						
Are you a citizen of India?	Yes / No		Passport No. (i foreigners)	n case of						
Residential Address (W	ithin the Country	7)								
Building No/Flat No			Floor No							
Name of the Premises/I	Building		Road/Street							
City/Town/Locality/Vil	llage		District							
State			PIN Code							
Block/Taluka						ı			I	
Note – Add more										
form> give consthe purpose of a information would with Central Ide	ne holder of Aadha sent to "Goods ar authentication. "C uld only be used f entities Data Repo	nd Services Goods and For validati	Tax Network" to Services Tax Net ng identity of the	o obtain my work" has Aadhar ho	y det infoi older	ails f rmed and	rom me t	UID. hat i	AI fo dent	or ity
•	nly affirm and dec y knowledge and i								<i>cor</i>	
Place: tax/Authorised		e of DDO/	Person responsib	ole for dedu	ıctin	g tax	/coll	ectin	g	
		I	Date: Designation							

## List of documents to be uploaded (not applicable to a department or establishment of the Central Government or State Government or Local Authority or Governmental agencies):-



Proof of Principal Place of Business:

(a) For Own premises –

Any document in support of the ownership of the premises like latest Property Tax Receipt or Municipal Khata copy or copy of Electricity Bill.

(b) For Rented or Leased premises –

A copy of the valid Rent / Lease Agreement with any document in support of the ownership of the premises of the Lessor like Latest Property Tax Receipt or Municipal Khata copy or copy of Electricity Bill.

(c) For premises not covered in (a) and (b) above –

A copy of the Consent Letter with any document in support of the ownership of the premises of the Consenter like Municipal Khata copy or Electricity Bill copy. For shared properties also, the same documents may be uploaded.

- (d) For rented/leased premises where the Rent/lease agreement is not available, an affidavit to that effect along with any document in support of the possession of the premises like copy of Electricity Bill.
- (e) If the principal place of business is located in an Special Economic Zone or the applicant is an Special Economic Zone developer, necessary documents/certificates issued by Government of India are required to be uploaded.

## Instructions for submission of application for registration as Tax Deductor/ Tax Collector.

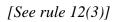
- 1. Enter name of Tax Deductor /Tax Collector as recorded on Tax Deduction and Collection Account Number/ Permanent Account Number of the Business. Tax Deduction and Collection Account Number/Permanent Account Number shall be verified with Income Tax database.
- 2. Provide Email Id and Mobile Number of DDO (Drawing and Disbursing Officer) / Person responsible for deducting tax/collecting tax for verification and future communication which will be verified through One Time Passwords to be sent separately, before filling up of the application.
- 3. Person who is acting as DDO/ Person deducting/collecting tax can sign the application.
- 4. The application filed by undermentioned persons shall be signed digitally.

Sr. No	Type of Applicant	Digital Signature required
-----------	-------------------	----------------------------

1.	Private Limited Company	Digital Signature Certificate(DSC) class 2
	Public Limited Company	above
	Public Sector Undertaking	
	Unlimited Company	
	Limited Liability Partnership	
	Foreign Company	
	Foreign Limited Liability Partnership	
2.	Other than above	Digital Signature Certificate class 2 and above, e-Signature or any other mode as specified or as may be notified.

- 5. All information relating to Permanent Account Number, Aadhaar, Director Identification Number, Challan Identification Number shall be validated online by the system and Acknowledgment Receipt Number will be generated after successful validation of all the filled information.
- 6. Status of the application filed online can be tracked on the Common portal.
- 7. No fee is payable for filing application for registration.
- 8. Authorised shall not be a minor.

\* Inserted by notification No. 1090-F.T. dated 28.06.2019 w.e.f. 28.06.2019.





Reference No	Date:
To	
Name:	
Address:	
Application Reference No. (ARN) (Reply)	Date:
Order of Cancellation of Registration as Tax Deductor source	at source or Tax Collector at
This has reference to the show-cause notice issued vide Reference 11 this part of a sixty of the Automorphism of the Automorph	erence Number dated
for cancellation of registration under the Act.	
Whereas no reply to show-cause notice has been filed; o	or
Whereas on the day fixed for hearing you did not appear	r; or
Whereas on the day fixed for hearing you did not appear Whereas your reply to the notice to show cause and so	submissions made at the time of
hearing have been examined. The undersigned is of the opin to be cancelled for the following reason(s).	ion that your registration is liable
1.	
2.	
The effective date of cancellation of registration is < <dd m<="" td=""><td>M/YYYY &gt;&gt;.</td></dd>	M/YYYY >>.
You are directed to pay the amounts mentioned below on or	_
the amount will be recovered in accordance with the provi	sions of the Act and rules made

thereunder.

(This order is also available on your dashboard).

Head	Integrated tax	Central tax	State tax	UT Tax	Cess
Tax					
Interest					
Penalty					
Others					
Total					

Signature Name

Designation Jurisdiction

[See rule 13(1)]



## **Application for Registration of Non Resident Taxable Person**

## Part -A

State /UT – District -

(i)	Legal Name of the Non-Resident Taxable Person	
(ii)	Permanent Account Number of the Non-Resident Taxable person, if any	
(iii)	Passport number, if Permanent Account Number is not available	
(iv)	Tax identification number or unique number on the basis of which the entity is identified by the Government of that country	
(v)	Name of the Authorised Signatory (as per Permanent Account Number)	
(vi)	Permanent Account Number of the Authorised Signatory	
(vii)	Email Address of the Authorised Signatory	
(viii)	Mobile Number of the Authorised Signatory (+91)	
Note-	Relevant information submitted above is subject to online verification, where p	racticable,

before proceeding to fill up Part-B.

## Part -B

First Name	Middle Name	
	Wildale I valle	Last Name
Photo		
Gender		Male / Female / Others
Designation		
Date of Birth		DD/MM/YYYY
Father's Name		
Nationality		
Aadhaar		
Address of the Aut	horised signatory.	Address line 1
		Address Line 2
		Address line 3

2. registration is required DD/MM/YYYY DD/MM/YYYY  Bestimated Turnover (Rs.)  Turnover Details Intra- State Inter -State Central State Tax Liability (Net) (Rs.)  Address of Non-Resident taxable person in the Country of Origin (In case of business entity - Address of the Office)  Address Line 1	Cess						
Turnover Details    Central   State   Inter - State   Central   Tax   Tax   Tax   Central   Ta	Cess						
Address of Non-Resident taxable person in the Country of Origin  (In case of business entity - Address of the Office)	Cess						
(In case of business entity - Address of the Office)							
Address Line 1							
Address Line 2							
Address Line 3							
Country (Drop Down)							
Zip Code							
E mail Address	E mail Address						
Telephone Number	Telephone Number						
Address of Principal Place of Business in India							
Building No./Flat No. Floor No.	lo.						
Name of the Premises/Building Road/Street	treet						
City/Town/Village/Locality	ict						
5 Block/Taluka District							
Latitude Longitude	ıde						
State PIN Code	N Code						
Mobile Number Telephone Number	hone Number						
E mail Address Fax Number with STD	Fax Number with STD						
Details of Bank Account in India							
Account Number Type of account							
Bank Name Branch Address IFSC							
Documents Uploaded							
A customized list of documents required to be uploaded (refer Instruction) as per the field v form	values in the						
8 Declaration							

I hereby solemnly affirm and best of my knowledge and beli	declare that the information given herein above is true and co ief and nothing has been concealed therefrom.	rrec RPVING OFF ARACTIFIONER
	S	Signature
Place:	Name of Authorised S	Signatory
Date:	Designation:	

**Note:** Non-Resident taxable person is required to upload declaration (as per under mentioned format) along with scanned copy of the passport and photograph.

## List of documents to be uploaded as evidence are as follows: -

1.	Proof of Principal Place of Business:
	(a) For own premises –
	Any document in support of the ownership of the premises like Latest Property Tax Receipt or Municipal Khata copy or copy of Electricity Bill.
	(b) For Rented or Leased premises –
	A copy of the valid Rent / Lease Agreement with any document in support of the ownership of the premises of the Lessor like latest Property Tax Receipt or Municipal Khata copy or copy of Electricity Bill.
	(c) For premises not covered in (a) and (b) above –
	A copy of the Consent Letter with any document in support of the ownership of the premises of the Consenter like Municipal Khata copy or Electricity Bill copy. For shared properties also, the same documents may be uploaded.
2.	Proof of Non-resident taxable person:
	Scanned copy of the passport of the Non -resident taxable person with VISA details. In case of a business entity incorporated or established outside India, the application for registration shall be submitted along with its tax identification number or unique number on the basis of which the entity is identified by the Government of that country or it's Permanent Account Number, if available.
3	Bank Account related proof:
	Scanned copy of the first page of Bank passbook or the relevant page of Bank Statement or Scanned copy of a cancelled cheque containing name of the Proprietor or Business entity, Bank Account No., MICR, IFSC and Branch details including code.
4	Authorisation Form:-
	For each Authorised Signatory mentioned in the application form, Authorisation or copy of Resolution of the Managing Committee or Board of Directors to be filed in the following format: Declaration for Authorised Signatory (Separate for each signatory) (Details of Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc.)I/We (name) being (Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of



Associations/Board of Trustees etc.) of ...... (name of registered person) hereby solemnly affirm and declare that <<name of the authorised signatory, (status/designation)>> is hereby authorised, vide resolution no... dated..... (Copy submitted herewith), to act as an authorised signatory for the business <<Goods and Services Tax Identification Number - Name of the Business>> for which application for registration is being filed under the Act. All his actions in relation to this business will be binding on me/ us. Signature of the person competent to sign

Name:

Designation/Status:

(Name of the proprietor/Business Entity)

Acceptance as an authorised signatory Acceptance as an authorised signatory

I <<(Name of the authorised signatory>> hereby solemnly accord my acceptance to act as authorised signatory for the above referred business and all my acts shall be binding on the business.

Signature of Authorised Signatory

Place: Date:

Designation/Status:

## Instructions for submission of application for registration as Non-Resident Taxable Person.



- 1. Enter Name of the applicant Non-Resident taxable person as recorded on Passport.
- 2. The applicant shall apply at least **Five** days prior to commencement of the business at the common portal.
- 3. The applicant needs to provide Email Id and Mobile Number for verification and future communication which will be verified through One Time Passwords to be sent separately, before filling up Part-B of the application.
- 4. The applicant needs to upload the scanned copy of the declaration signed by the Proprietor/all Partners /Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc. in case the business declares a person as Authorised Signatory.
- 5. The application filed by the under-mentioned persons shall be signed digitally: -

Sr. No	Type of Applicant	Digital Signature required
1.	Private Limited Company Public Limited Company Public Sector Undertaking Unlimited Company Limited Liability Partnership Foreign Company Foreign Limited Liability Partnership	Digital Signature Certificate(DSC) class 2 and above
2.	Other than above	Digital Signature Certificate class 2 and above e-Signature or as may be notified

- 6. All information related to Permanent Account Number, Aadhaar, shall be online validated by the system and Acknowledgment Receipt Number will be generated after successful validation of all filled up information.
- 7. Status of the application filed online can be tracked on the common portal.
- 8. No fee is payable for filing application for registration
- 9. Authorised signatory shall be an Indian national and shall not be a minor.



[See rule 14(1)]

Application for registration of person supplying online information and data base access or retrieval services from a place outside India to a person in India, other than a registered person.

#### Part -A

Legal Name of the person	
Tax identification number or unique number on the basis of which the entity is identified by the Government of that country	
Name of the Authorised Signatory	
Email Address of the Authorised Signatory	
Name of the representative appointed in India, if any	
Permanent Account Number of the representative in India	
Email Address of the representative in India	
Mobile Number of the representative in India (+91)	
	Tax identification number or unique number on the basis of which the entity is identified by the Government of that country  Name of the Authorised Signatory  Email Address of the Authorised Signatory  Name of the representative appointed in India, if any  Permanent Account Number of the representative in India  Email Address of the representative in India

*Note*- Relevant information submitted above is subject to online verification, where practicable, before proceeding to fill up Part-B.

#### Part -B

1.	Details of Authoris	sed Signatory (shall be res	ident of India)	
	First Name	Middle Name	Last Name	
	Photo			
	Gender		Male / Female / Others	
	Designation			
	Date of Birth		DD/MM/YYYY	
	Father's Name			
	Nationality			
	Aadhaar, if any			
	Address of the Authorised Signatory		Address line 1	
			Address line 2	
			Address line 3	

2.	Date of conservice in	mmencement India.	of the online	DD/MM/YY	YY		*SERVING OF
3	Uniform R 1. 2. 3	desource Loca	tors (URLs) of th	e website through v	which taxable	services are	e provided:
4	Jurisdiction	n	Centre		Bengaluru W CGST Comm	aluru West, Γ Commissionerate	
	Details of	Bank Accoun	t of representative	e in India, if appoin	ited		
5	Account Number			Type of account			
	Bank Name		Branch Address			IFSC	
	Document	s Uploaded					
6	A customized list of documents required to be uploaded (refer Instruction) as per the field values in the form				field values in		
	Declaration I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.						
I,hereby declare that I am authorised to sign on behalf of the would charge and collect tax liable from the non-assesse online recipient local territory and deposit the same with Government of India.							
	Signature						
	Place:				Name of Autl	horised Sign	natory:
	Date:				Designation:		

Note: Applicant will require to upload declaration (as per under mentioned format) along with scanned copy of the passport and photograph.

List of documents to be uploaded as evidence are as follows:-

1.	Proof of Place of Business of representative in India, if any:			
	(a) For Own premises –			
	Any document in support of the ownership of the premises like Latest Property Tax Receipt or Municipal Khata copy or copy of Electricity Bill.			
	(b) For Rented or Leased premises –			
	A copy of the valid Rent / Lease Agreement with any document in support of the ownership of the premises of the Lessor like Latest Property Tax Receipt or Municipal Khata copy or copy of Electricity Bill.			
	(c) For premises not covered in (a) and (b) above –			
	A copy of the Consent Letter with any document in support of the ownership of the premises of the Consenter like Municipal Khata copy or Electricity Bill copy. For shared properties also, the same documents may be uploaded.			

2.	Proof of:				
	Scanned copy of the passport of the Non -resident tax payer with VISA details. In case of Company/Society/LLP/FCNR/ etc. person who is holding power of attorney with authorisation letter.				
	Scanned copy of Certificate of Incorporation if the Company is registered outside India o in India				
	Scanned copy of License issued by origin country				
	Scanned copy of Clearance certificate issued by Government of India				
3	Bank Account Related Proof:				
	Scanned copy of the first page of Bank passbook / one page of Bank Statement				
	Opening page of the Bank Passbook held in the name of the Proprietor / Business Concern – containing the Account No., Name of the Account Holder, MICR and IFSC and Branch details.				
4	Authorisation Form:-				
	For Authorised Signatory mentioned in the application form, Authorisation or copy Resolution of the Managing Committee or Board of Directors to be filed in the follow format:				
	Declaration for Authorised Signatory (Separate for each signatory)				
	I (Managing Director/Whole Time Director/CEO or Power of Attorney holder) hereby solemnly affirm and declare that << name of the authorised signatory>>> to act as an authorised signatory for the business << Name of the Business>>> for which application for registration is being filed/ is registered under the Goods and Service Tax Act, 2017.				
	All his actions in relation to this business will be binding on me/ us.				
	Signatures of the persons who is in charge.				
	S. No. Full Name Designation/Status Signature				
	1.				
	Acceptance as an authorised signatory  I <<(Name of authorised signatory>> hereby solemnly accord my acceptance to act as authorised signatory for the above referred business and all my acts shall be binding on the business.				
	Place Signature of Authorised Signatory				
	(Name)				
	Date: Designation/Status				

#### Instructions -

- 1. If authorised signatory is not based in India, authentication through digital signature certificate shall not be mandatory for such persons. The authentication will be done through Electronic Verification Code (EVC).
- 2. Appointed representative in India shall have the meaning as specified under section 14 of Integrated Goods and Services Tax Act, 2017.

<sup>#</sup> Substituted by Notification No. 2313-F.T. dated 29.12.2017.

[See rule 15(1)]



#### Application for extension of registration period by casual / non-resident taxable person

1.	GSTIN						
2.	Name (Legal)						
3.	Trade Name, if a	nny					
4.	Address						
5.	Period of Validit	ty (original)	From		То		
			DD/MM/YYYY		DD/MM/YYYY		YY
6.	Period for which	extension is requested.	From		То		
			DD/MM/	YYYY	DI	D/MM/YY	YY
7.	Turnover Details	s for the extended	Estimated	Tax Liab	ility (Ne	t) for the e	xtended
	period (Rs.)		period (Rs	.)			
	Inter- State	Intra-State	Central	State	UT	Integrat	Cess
			Tax	Tax	Tax	ed Tax	Cess
8.	Payment details						
	Date	CIN	BRN Amour		Amount		
9.	Declaration -						
	-	ly affirm and declare tha	•	_			
	correct to the be	st of my knowledge and b	elief and no	thing has	been cor	ncealed the	refrom.
				,	Signature	;	
Place: Name of Authorised Signatory:							
Date:				Desig	gnation /	Status:	

## Instructions for submission of application for extension of validity

- 1. The application can be filed online before the expiry of the period of validity.
- 2. The application can only be filed when advance payment is made.
- 3. After successful filing, Application Reference Number will be generated which can be used to track the status of the application.



[See rule 16(1)]

Reference Number -	Date:
То	
(Name):	
(Address):	
Temporary Registration Number	

## Order of Grant of Temporary Registration/ Suo Moto Registration

Whereas the undersigned has sufficient reason to believe that you are liable for registration under the Act, and therefore, you are hereby registered on a temporary basis. The particulars of the business as ascertained from the business premises are given as under:

	Deta	nils of person to whom temporary	registration granted
1.	Name and L	egal Name, if applicable	
2.	Gender		Male/Female/Other
3.	Father's Nar	me	
4.	Date of Birth	1	DD/MM/YYYY
5.	Address of the Person    Building No./ Flat No.     Floor No.     Name of Premises/ Building     Road/ Street     Town/City/Locality/ Village     Block / Taluka     District     State     PIN Code		
6.	Permanent A available	Account Number of the person, if	
7.	Mobile No.		
8.	Email Addre		
9.	Other ID, if (Voter ID No	any o./ Passport No./Driving License	

	No./ Aadhaar No./ Other)		
10.	Reasons for temporary registration		
11.	Effective date of registration / temporary ID		
12.	Registration No. / Temporary ID		
(Uploa	oad of Seizure Memo / Detention Memo / Any othe	er supporting documents)	
	ou are hereby directed to file application for proper sue of this order>>	r registration <sup>#</sup> [within 90 days] of	
		Signature	
Place	<< Name o	of the Officer>>:	
Date: Jurisd	diction:	Designation/	
Note:	: A copy of the order will be sent to the correspond Authority.	ding Central/ State Jurisdictional	
*13. Г	Details of Bank Accounts (s) [Optional]		

Total number of Bank Accounts maintained by the	
applicant (Upto 10 Bank Accounts to be reported)	
Datails of Pank Assount 1	

#### Details of Bank Account 1

Account Number											
Type of Account						IFS	SC				
Bank Name											
Branch Address	To be	auto	-pop	oula	ted (	Edit	mo	de)			

## Note-Add more bank accounts

<sup>\*\*</sup> Substituted by Notification No. 1150-F.T. dated 29.06.2017 w.e.f. 22.06.2017. \*\* Inserted by notification No. 1090-F.T. dated 28.06.2019 w.e.f. 28.06.2019.



[See Rule 17]

# Application/Form for grant of Unique Identity Number (UIN) to UN Bodies/ Embassies /others

State /UT – District –

## PART A

(i)	Name of the Entity	
(ii)	Permanent Account Number (PAN) of entity (Not applicable for entities specified in clause (a) of sub-section (9) of section 25 of the Act)	
(iii)	Name of the Authorised Signatory	
(iv)	PAN of Authorised Signatory	
	(Not applicable for entities specified in clause (a) of sub-section (9) of section 25 of the Act)	
(v)	Email Address of the Authorised Signatory	
(vi)	Mobile Number of the Authorised Signatory (+91)	

## PART B

1.	Type of Entity (Choose one)	UN Body	0	Embassy	Other	r Person	0
2.	Country						
2A.	Ministry of External Affairs, (India' Recommendation (if ap		of	Letter No.		Date	
3.	Notification details			Notificatio	n No.	Date	
4.	*Address of the entity in res	pect of whic	h the	centralised I	JIN is sough	nt	
	Building No./Flat No.			Floor No.			
	Name of the Premises/Building		Road/Street				
	City/Town/Village			District			
	Block/Taluka						
	Latitude			Longitude			
	State			PIN Code			
	Contact Information						
	Email Address			Telephone i	number		
	Fax Number			Mobile Nur	nber		
7.	Details of Authorized Signato	ry, if applica	able				

	Particulars	First Name	Middle Name	Last name						
Name										
	Photo									
	Name of Father									
	Date of Birth	DD/MM/YYYY	Gender	<male, female,<br="">Other&gt;</male,>						
	Mobile Number		Email address							
	Telephone No.									
	Designation /Status		Director Identifica Number (if any)	ition						
	PAN (Not applicable for entities specified in clause (a) of sub- section (9) of section 25 of the Act)		Aadhaar Number (Not applicable for entities specified is clause (a) of subsection (9) of section 25 of the Act)	n						
	Are you a citizen of India?	Yes / No	Passport No. (in cof foreigners)	rase						
	Residential Address									
	Building No/Flat No		Floor No							
	Name of the Premises/Building		Road/Street							
	Town/City/Village		District							
	Block/Taluka									
	State		PIN Code							
8	Bank Account Details	(add more if required	)							
	Account Number		Type of Account							
	IFSC		Bank Name							
	Branch Address									
9.	Documents Uploaded									
	scanned copy of such	-	of the documentary evide the copy of resolution tity.	-						
	Or	Or								
	The proper officer who has collected the documentary evidence from the applicant shall upload the scanned copy of such documents including the copy of resolution / power of attorney, authorizing the applicant to represent the UN Body / Embassy etc. in India and link it along with the UIN generated and allotted to respective UN Body/ Embassy etc.									

#### 11. Verification



I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.

Place:	(Signature)
Date:	Name of Authorized Person:
Or	
	(Signature)
Place:	Name of Proper Officer:
Date:	Designation:
	Jurisdiction:

Instructions for submission of application for registration for UN Bodies/ Embassies/others notified by the Government.

- \*Every person required to obtain a unique identity number shall submit the application electronically or otherwise.
- Application shall be filed through Common Portal or registration can be granted *suo-moto* by proper officer.
- The application filed on the Common Portal is required to be signed electronically or through any other mode as specified by the Government.
- The details of the person authorized by the concerned entity to sign the refund application or otherwise, should be filled up against the "Authorised Signatory details" in the application.
- PAN / Aadhaar will not be applicable for entities specified in clause (a) of sub-section (9) of section 25 of the Act

<sup>\*\*</sup>Substituted by Notification No. 1456-F.T. dated 17.08.2017 w.e.f. 22.06.2017.

<sup>\*</sup>Substituted by Notification No. 2313-F.T. dated 29.12.2017.



[See rule 19(1)]

## Application for Amendment in Registration Particulars (For all types of registered persons)

1. GSTI	N/UIN			
2. Name	of Business			
	of registration			
4. Amer	ndment summary			
Sr. No	Field Name	Effective Date (DD/MM/YYYY)	Rea	sons(s)
5. List o	of documents uploaded			
(a)				
(b)				
(c)				
•••				
I hereby	aration solemnly affirm and declo o the best of my knowledge	v	0	
			S	Signature
	Place:		N	Name of
A	uthorised Signatory			Date:
		Designation / Status	:	



#### **Instructions for submission of application for amendment**

- 1. Application for amendment shall be submitted online.
- 2. Changes relating to Name of Business, Principal Place of Business, additional place(s) of business and details of partners or directors, karta, Managing Committee, Board of Trustees, Chief Executive Officer or equivalent, responsible for day to day affairs of the business which does not warrant cancellation of registration, are core fields which shall be approved by the Proper Officer after due verification.
- 3. For amendment in Non-Core fields, approval of the Proper Officer is not required.
- 4. Where a change in the constitution of any business results in change of the Permanent Account Number of a registered person, the said person shall be required to apply for fresh registration.
- 5. Any change in the mobile number or the e-mail address of authorised signatory as amended from time to time, shall be carried out only after online verification through the common portal.
- 6. All information related to Permanent Account Number, Aadhaar, Director Identification Number, Challan Identification Number shall be validated online by the system and Application Reference Number (ARN) will be generated after successful validation of necessary field.
- 7. Status of the application can be tracked on the common portal.
- 8. No fee is payable for submitting application for amendment.
- 9. Authorised signatory shall not be a minor.



[See rule 19(1)]

Reference Number - <<>>	Date – DD/MM/YYYY
To (Name) (Address) Registration Number (GSTIN / UIN) Application Reference No. (ARN)	Dated – DD/MM/YYYY
Order of Amendment	
This has reference to your application number datedregistration particulars. Your application has been examined and t be in order. The amended certificate of registration is availab download.	he same has been found to
Signature	Name Designation Jurisdiction

Date Place



[See rule 20]

## **Application for Cancellation of Registration**

1	GSTIN				
2	Legal name				
3	Trade name, if any				
4	Address of Principal Place of Business				
5	Address for	Building No./ Flat No.		Floor No.	
	future correspondence (including email,	Name of Premises/ Building		Road/ Street	
	mobile telephone, fax )	City/Town/ Village		District	
		Block/Taluka			
		Latitude		Longitude	
		State		PIN Code	
		Mobile (with country code)		Telephone	
		email		Fax Number	
6.	Reasons for Cancellation (Select one)	business  Ceased to be liable to Transfer of bu account of am merger/ demerger, or otherwise dispose	siness on algamation, sale, lease ed of etc. titution of change in Number		
7.		Fer, merger of business artration of entity in which	_	_	=
(i)	Goods and	and of ondry in which i		., mansionio	.,
	Services Tax Identification				

	Number								*SERVING
(ii)	(a) Name								SST ANACTITIO
(11)	(Legal)								
	(b) Trade								
	name, if any						T		
(iii)	Address of Principal Place	Building No./ Flat	No.				Floor No.		
	Principal Place of Business	Name of Premises	/ Buildin	ıg			Road/ Stre	eet	
		City/Town/ Villag	ge				District		
		Block/Taluka							
		Latitude					Longitude		
		State					PIN Code		
		Mobile (with coun	ntry code	)			Telephone	;	
		email					Fax Num	ıber	
8.	Date from which r	egistration is to be	cancelled	1. <	DD/I	MM/Y	YYY>		
9	Particulars of last	Return Filed							
(i)	Tax period								
(ii)	Application Refere	ence Number							
(iii)	Date								
10.		payable in respect	of inputs	/capit	al go	ods he	eld in stock or	the effective	e date of
	cancellation of	registration.							
			Value			-	Tax Credit/ 7	•	
	D	• ,•	of			(wnic	hever is high	er) (Rs.)	
	Des	cription	Stock	Cent		State	I I I I I I av	Integrated	Cess
			(Rs.)	Ta	ıx	Tax		Tax	
	Inputs	1							
	Inputs contained finished goods								
	Inputs contained								
	goods								
	Capital Goods	Plant and							
	machinery								
11	Total	:1 :6							
11.	Details of tax p	5a10, 11 any							
		I	Payment	from (	Cash	Ledge	er		
	Sr. No.	Debit Entry No.	Centra Tax	al s	State 7	Гах	UT Tax	Integrated Tax	Cess
	1.		Tux					1 11/1	
	2.								
		Sub-Total							
			Payment	from	ITC I	Ledge	r		
	Sr. No.	Debit Entry No.		.					~
	S1. IVO.	Deon Entry No.	Centra	al   S	State 7	Гах	UT Tax	Integrated	Cess

			Tax			Tax	SERVI
	1.						to on the second
	2.						*ACTITIO
		Sub-Total					
	Total Amount	of Tax Paid					
2. Doc	cuments uploaded	d	•	<u>'</u>	•		•

Verification

13.

I/We <> hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my/our knowledge and belief and nothing has been concealed therefrom.

Signature of Authorised Signatory				
Place	Name of the Authorised Signatory			
Date	Designation / Status			

<sup>\*</sup> Substituted by Notification No. 1570-F.T. dated 02.11.2018 w. e. f. 30.10.2018 for the following: – "In case of transfer, merger of business, particulars of registration of entity in which merged, amalgamated, transferred, etc."



#### **Instructions for filing of Application for Cancellation**

- A registered person seeking cancellation of his registration shall electronically submit an application including details of closing stock and liability thereon along with relevant documents, on common portal.
- The following persons shall digitally sign application for cancellation, as applicable:

Constitution of Business	Person who can digitally sign the application
Proprietorship	Proprietor
Partnership	Managing / Authorised Partners
Hindu Undivided Family	Karta
Private Limited Company	Managing / Whole-time Directors/ Chief Executive Officer
Public Limited Company	Managing / Whole-time Directors/ Chief Executive Officer
Society/ Club/ Trust/ AOP	Members of Managing Committee
Government Department	Person In charge
Public Sector Undertaking	Managing / Whole-time Directors/ Chief Executive Officer
Unlimited Company	Managing / Whole-time Directors/ Chief Executive Officer
Limited Liability Partnership	Designated Partners
Local Authority	Chief Executive Officer or Equivalent
Statutory Body	Chief Executive Officer or Equivalent
Foreign Company	Authorised Person in India
Foreign Limited Liability Partnership	Authorised Person in India
Others	Person In charge

<sup>&</sup>lt;sup>#</sup>[In case of death of sole proprietor, application shall be made by the legal heir / successor before the concerned tax authorities. The new entity in which the applicant proposes to amalgamate itself shall register with the tax authority before submission of the application for cancellation. This application shall be made only after the new entity is registered. Before applying for cancellation, please file your tax return due for the tax period in which the effective date of surrender of registration falls or furnish an application to the effect that no taxable supplies have been made during the intervening period (i.e. from the date of registration to the date of application for cancellation of registration).]

• Status of the Application may be tracked on the common portal.



- No fee is payable for filing application for cancellation.
- After submission of application for cancellation of registration, the registered person shall make payment, if not made at the time of this application, and shall furnish final return as provided in the Act.
- The registered person may also update his contact address and update his mobile number and e mail address.

Before applying for cancellation, please file **your tax return due** for the tax period in which the effective date of surrender of registration falls."

 $<sup>\</sup>frac{\#}{}$  Substituted by Notification No. 1570-F.T. dated 02.11.2018 w. e. f. 30.10.2018 for the following: -

<sup>&</sup>quot;In case of death of sole proprietor, application shall be made by the legal heir / successor manually before the concerned tax authorities. The new entity in which the applicant proposes to amalgamate itself shall register with the tax authority before submission of the application for cancellation. This application shall be made only after that the new entity is registered.



[See rule 22(1)]

Reference No	<< Date >>
То	
Registration Number (GSTIN/Ul	N)
(Name)	
(Address)	
<b>Show Cause</b>	Notice for Cancellation of Registration
	nation which has come to my notice, it appears that your
registration is liable to be cancell	ed for the following reasons: -
2	
3	
☐You are hereby directed to furndate of service of this notice.	ish a reply to this notice within seven working days from the
If you fail to furnish a reply with	pear before the undersigned on DD/MM/YYYY at HH/MM in the stipulated date or fail to appear for personal hearing on the case will be decided ex parte on the basis of available
*[Note: - Your registration stands	s suspended with effect from (date).]
Place:	
Date:	
	Signature
	< Name of the Officer>
	Designation Jurisdiction

<sup>\*</sup> Inserted by Notification No. 173-F.T. dated 29.01.2019 w. e. f. 01.02.2019.



[See rule 22(2)]

## Reply to the Show Cause Notice issued for cancellation for registration

1.	Reference No. of Notice		Date of issue	
2.	GSTIN / UIN			
3.	Name of business (Legal)			
4.	Trade name, if any			
5.	Reply to the notice			
6.	List of documents uploaded			
7.	Verification  I		e is true and co	
	Signature of Authorised Sign	natory		
		Name		
	Designation/Status			
	Place			
	Date			



[See rule 22(3)]

		[See r	uie 22(3)]				
Reference To Name Address	No	-	<del>.</del>	Date			
GSTIN / U	IN						
Application	n Reference No. (	ARN)	Da	ite			
Where Where hearing, ar reason(s).  1. 2. The effection Determination According The amount may be four You are reasonable.	Order for Cancellation of Registration  This has reference to your reply dated in response to the notice to show cause dated  Whereas no reply to notice to show cause has been submitted; or  Whereas on the day fixed for hearing you did not appear; or  Whereas the undersigned has examined your reply and submissions made at the time of hearing, and is of the opinion that your registration is liable to be cancelled for following reason(s).  1.  2.  The effective date of cancellation of your registration is < <dd mm="" yyyy="">&gt;.  Determination of amount payable pursuant to cancellation:  Accordingly, the amount payable by you and the computation and basis thereof is as follows: The amounts determined as being payable above are without prejudice to any amount that may be found to be payable you on submission of final return furnished by you.  You are required to pay the following amounts on or before (date) failing which the amount will be recovered in accordance with the provisions of the Act and rules made</dd>						
Head	Central Tax	State Tax	UT Tax	Integrated Tax	Cess		
Tax		2000					
Interest							
Penalty							
Others							
Total							
Place: Date:			•				



[See rule 22(4)]

	[500 / 1110 22(1)]	
Reference No		Date
To		
Name		
Address		
GSTIN/UIN		

Show Cause Notice No.

## Order for dropping the proceedings for cancellation of registration

Date

This has reference to your reply filed vide ARN ............. dated ----- in response to the notice to show cause notice referred to above. Upon consideration of your reply and/or submissions made during hearing, the proceedings initiated for cancellation of registration stands vacated due to the following reasons:

<<text>>

or

The above referred show cause notice was issued for contravention of the provisions of clause (b) or clause (c) of sub-section (2) of section 29 of the West Bengal Goods Services Tax Act, 2017. As you have filed all the pending returns which were due on the date of issue of the aforesaid notice, and have made full payment of tax along with applicable interest and late fee, the proceedings initiated for cancellation of registration are hereby dropped.

[Note: - Your registration stands revoked with effect from	(date).]

Signature < Name of the Officer>

Designation

Jurisdiction

Place: Date:

<sup>\*</sup>Subs. by Notification No.1339-F.T. dated 13 .09.2018 w. e. f. 04.09.2018.

<sup>\*</sup> Inserted by Notification No. 173-F.T. dated 29.01.2019 w. e. f. 01.02.2019.



[See rule 23(1)]

## **Application for Revocation of Cancellation of Registration**

1.	GSTIN (cancelled)	)						
2.	Legal Name							
3.	Trade Name, if any							
4.	Address							
	(Principal place of	business)						
5.	Cancellation Order	r No.			Date –			
6	Reason for cancell	ation						
7	Details of last return	rn filed	•					
	Period of Return			Application Reference Number		Date of fi	ling	DD/MM/YY YY
8	Reasons for revoca cancellation	ation of		easons in brief. ( eachment)	Detaile	d reasonin	g can	be filed as an
9	Upload Document	S						
10.	Verification							
	I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.							
	Signature of Authorised Signatory Full Name							
	(first name, middle, surname)  Designation/Status							
	Place							
	Date							

## Instructions for submission of application for revocation of cancellation of registration

• A person, whose registration is cancelled by the proper officer on his own motion, may apply for revocation of cancellation of registration, within thirty days from the date of service of the order of cancellation of registration <sup>1</sup>[or within such time period as extended by the Senior Joint Commissioner or the Joint Commissioner or Commissioner, as the case may be, in exercise of the powers provided under proviso to sub-section (1) of section 30,] at the common portal. No application for revocation shall be submitted if the registration has been cancelled for the failure to furnish returns unless such returns are furnished and any amount due as tax in terms of such



returns has been paid along with any amount payable towards interest, penalty and late fee payable in respect of the said returns.

- Any change in the mobile number or the e-mail address of authorised signatory submitted as amended from time to time, shall be carried out only after online verification through the common portal in the manner provided
- Status of the application can be tracked on the common portal.
- No fee is payable for filing application for revocation of cancellation.

<sup>1.</sup> Inserted by notification No. 609-F.T. dated 03.06.2021 w.e.f. 18.05.2021.



[See rule 23(2)]

Reference No. - Date

To GSTIN / UIN (Name of Taxpayer) (Address)

Application Reference No. (ARN)

Date

#### Order for revocation of cancellation of registration

This has reference to your application dated DD/MM/YYYY for revocation of cancellation of registration. Your application has been examined and the same has been found to be in order. Accordingly, your registration is restored.

Signature Name of Proper officer (Designation) Jurisdiction –

Date Place



[See rule 23(3)]

Reference Number:	Date
To Name of the Applicant/ Taxpayer Address of the Applicant/Taxpayer GSTIN Application Reference No. (ARN):	Dated
· · · · · · · · · · · · · · · · · · ·	application for revocation of cancellation of gistration
cancellation of registration. Your application rejected for the following reasons:  1.  2.  3	dated DD/MM/YYYY regarding revocation of on has been examined and the same is liable to be to this notice within seven working days from the
date of service of this notice.	
If you fail to furnish a reply within the s	the undersigned on DD/MM/YYYY at HH/MM. stipulated day or you fail to appear for personal he case will be decided ex parte on the basis of Signature
	Name of the Proper Officer
	Designation  Jurisdiction



# [See rule 23(3)] Reply to the notice for rejection of application for revocation of cancellation of registration

1.	Reference No. of Notice		Date	
2.	Application Reference No. (ARN)		Date	
3.	GSTIN, if applicable			
4.	Information/reasons			
5.	List of documents filed			
6.	Verification  I and declare that the inform of my/our knowledge and be Signature of Authorised Signature.	pelief and nothing	nabove is true ar	
	Place			Name
	1 lace			Dagi amati am/Status
				Designation/Status





[See rule 24(1)]

# #[GSTIN]

1.	Provisional ID				
2.	Permanent				
	Account Number				
3.	Legal Name				
4.	Trade Name				
5.	Registration Detai	ls under Existi	ng Law	7	
	A	Act		Registration Nu	mber
(a)					
(b)					
(c)					
Date		of creation	of	*[Omitted]	*[Omitted]
	Certificate	<b>!&gt;</b>			

This is a Certificate of Provisional Registration issued under the provisions of the Act.

<sup>\*</sup>Substituted by Notification No. 1150-F.T. dated 29.06.2017 w.e.f. 22.06.2017. \*Omitted by Notification No. 1150-F.T. dated 29.06.2017 w.e.f. 22.06.2017.



[See rule 24(2)]

Application for Enrolment of Existing Taxpayer					
Taxpa	yer Details				
1. Pro	ovisional ID				
	al Name (As per ment Account Number				
	ral Name (As per Center)				
4. Tra	nde Name, if any				
Numl	manent Account per of the Business				
6. Cor	nstitution				
7. Stat	te				
	ctor, Circle, Ward, etc. licable				
7B. C	entre Jurisdiction				
obtain	son of liability to Registration	Registration under	earlier law		
9. Exi	sting Registrations				
Sr. No.	Type of Registration		Registration Number	Date of Registration	
1	TIN Under Value Ad	ded Tax			
2	Central Sales Tax Re	gistration Number			
3	Entry Tax Registration	n Number			
4	Entertainment Tax Ro Number	egistration			
5	Hotel And Luxury Ta Number	x Registration			
6	Central Excise Regist	ration Number			
7	Service Tax Registrat	ion Number			
8	Corporate Identify No Company Registratio	_			
9	Limited Liability Part Identification Numbe Liability Partnership	r/Foreign Limited			

	Number			SERVING
10	Import/Exporter Code	e Number		-
11	Registration Under D Medicinal And Toile			
12	Others (Please specif	y)		
10 D	(1 CD: 1 D)	CD :		
	etails of Principal Place	e of Business	Tem 32	
	ng No. /Flat No.		Floor No	
	of the ses/Building		Road/Street	
Locali	ity/Village		District	
State			PIN Code	
Latitu	de		Longitude	
Conta	ct Information			
Office	Email Address		Office Telephone N	umber
Mobil	e Number		Office Fax No	
10A. I Premi	Nature of Possession of	f (Own; Lease	ed; Rented; Consent; S	Shared)
		ivities being carried out		
	ry / Manufacturing	Wholesale Business	Retail Business O	Warehouse/Depot
Bonde	ed Warehouse	Service Provision	Office/Sale Office	Leasing Business
Servic	ee Recipient	EOU/ STP/ EHTP	SEZ O	Input Service Distributor (ISD)
Works	s Contract	Others (Specify)		
11. De	etails of Additional Pla	ces of Business		
Buildi	ng No/Flat No		Floor No	
Name Premi	of the ses/Building		Road/Street	
Locali	ity/Village		District	
State			PIN Code	
Latitu	de (Optional)		Longitude(Optional	
Conta	ct Information	1	•	•

Office Ema	il Address	Office Telephone Number							*SERVING
Mobile Nur	nber		Offic	e Fax No	)				OS, A
11A.Nature	of Possession of	of Premises (Own; Leased; Rented; Consent; Shared)							
11B.Nature	of Business Acti	vities being carri	ed out						
Factory / Manufactur	ing	Wholesale Business	0	Retail	Business O	War	rehouse/	Depot	0
Bonded Wa	rehouse O	Service Provision Office/Sale Office		Leas	sing Bus	iness	0		
Service Rec	eipient O	EOU/ STP/ EHTP	0	SEZ	0	_	ıt Servic tributor		0
Works Con	tract O	Others (Specify	y) ()						
Add More -		l		I					
12. Details	of Goods/ Service	es supplied by the	ne Busin	ness					
Sr. No.	Description of C	Goods				Н	SN Code	е	
Sr. No.	Description of S	Services				Н	SN Code	е	
13. Total Ba	ank Accounts ma	intained by you f	for conc	ducting E	Business				
Sr. No.	Account Number	Type of Account	IFSC		Bank Name		Branch A	Address	
	of Proprietor/all g Committee of A					ole tii	me Direc	ctor/Men	nbers
Name		<first name=""></first>	<mid< td=""><td>ldle Nam</td><td>ne&gt;</td><td><la Nan</la </td><td></td><td><pho< td=""><td>to&gt;</td></pho<></td></mid<>	ldle Nam	ne>	<la Nan</la 		<pho< td=""><td>to&gt;</td></pho<>	to>
Name of Fa	ther/Husband	<first name=""></first>	<mid< td=""><td>ldle Nam</td><td>ne&gt;</td><td><la Nan</la </td><td></td><td>\1 H0</td><td>10/</td></mid<>	ldle Nam	ne>	<la Nan</la 		\1 H0	10/
Date of Birth	DD/ MM/ YYYY	Gender	1		<male, fer<br="">Other&gt;</male,>	nale,			
Mobile Nur	nber		Emai	1 Addres	SS				
Telephone I	Number								
Identity Info	ormation	L	1			1			I

Designati on		Director Identification Number					SERVING GS		
Permanent Account Number		Aadl	naar Numbe	er					
Are you a cit	izen of India?		<yes no=""></yes>	>	Passport	Number			-
Residential A	Address				1		l		
Building No.	Flat No				Floor No				
Name of the	Premises/Buildi	ng			Road/Stro	eet			
Locality/Vill	age				District				
State					PIN Code	e			
15. Details o	f Primary Autho	rised	Signatory		•		II.		
Name		<firs< td=""><td>st Name&gt;</td><td><mid< td=""><td>dle Name&gt;</td><td>&gt;</td><td><last Name&gt;</last </td><td></td><td></td></mid<></td></firs<>	st Name>	<mid< td=""><td>dle Name&gt;</td><td>&gt;</td><td><last Name&gt;</last </td><td></td><td></td></mid<>	dle Name>	>	<last Name&gt;</last 		
Name of Fat	her/Husband	<firs< td=""><td colspan="2">irst Name&gt; <middle name=""></middle></td><td><last Name&gt;</last </td><td><photo></photo></td><td></td></firs<>	irst Name> <middle name=""></middle>		<last Name&gt;</last 	<photo></photo>			
Date of Birth	l	DD / YYY	MM / Gender <male, fe<="" td=""><td>Semale,</td><td></td><td></td></male,>		Semale,				
Mobile Num	ber			Email	l Address				
Telephone N	umber			•			•		
Identity Info	rmation								
Designation				Direc	tor Identifi	cation Nu	mber		
Permanent A Number	ccount			Aadh	aar Numbe	er			
Are you a cit	izen of India?	<yes< td=""><td>s/No&gt;</td><td>•</td><td>Passport</td><td>Number</td><td></td><td></td><td></td></yes<>	s/No>	•	Passport	Number			
Residential A	Address						l		
Building No.	Flat No				Floor No				
Name of the	Premises/Buildi	ng			Road/Stro	eet			
Locality/Vill	age				District				
State					PIN Code	e			
Add More	_								

# List of Documents Uploaded

A customized list of documents required to be uploaded as per the field values in the form should be auto-populated with provision to upload relevant document against each entry in the list. (Refer instruction)

#### 16. Aadhaar Verification

I on behalf of the holders of Aadhaar numbers provided in the form, give consent to "Goods and Services Tax Network" to obtain details from UIDAI for the purpose of authentication. "Goods and Services Tax Network" has informed me that identity information would only be used for validating identity of the Aadhaar holder and will be shared with Central Identities Data Repository only for the purpose of authentication.

#### 17. Declaration

I, hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.

#### Digital Signature/E-Sign

Name of the Authorised Signatory	Place	
Designation of Authorised Signatory	Date	

#### **Instructions for filing of Application for enrolment**

- 1. Every person, other than a person deducting tax at source or an Input Service Distributor, registered under an existing law and having a Permanent Account Number issued under the Income-tax Act, 1961 (Act 43 of 1961) shall enrol on the common portal by validating his e-mail address and mobile number.
- 2. Upon enrolment under clause (a), the said person shall be granted registration on a provisional basis and a certificate of registration in **FORM GST REG-25**, incorporating the Goods and Services Tax Identification Number therein, shall be made available to him on the common portal:
- 3. Authorisation Form:-

For each Authorised Signatory mentioned in the application form, Authorisation or copy of Resolution of the Managing Committee or Board of Directors to be filed in the following format:

Declaration for Authorised Signatory (Separate for each signatory)

I ---

(Details of Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc.)

1. << Name of the Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc.>>

2.

3.

hereby solemnly affirm and declare that << name of the authorised signatory>> to act as an authorised signatory for the business << Goods and Services Tax Identification Number - Name of the Business>> for which application for registration is being filed/ is registered under the West Bengal Goods and Services Tax Act, 2017.

All his actions in relation to this business will be binding on me/ us.

S. No.

1.

Full Name



Signatures of the persons who are Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc.

Designation/Status Signature

2.	
Acceptance as an authorised signatory	
I <<(Name of the authorised signatory>> hereby authorised signatory for the above referred business.	
Signatory	Signature of Authorised
Designation/Status	
Date	
Place	

#### Instructions for filing online form

- Enter your Provisional ID and password as provided by the State/Commercial Tax/Central Excise/Service Tax Department for log in on the GST Portal.
- Correct Email address and Mobile number of the Primary Authorised Signatory are to be provided. The Email address and Mobile Number would be filled as contact information of the Primary Authorised Signatory.
- E mail and Mobile number to be verified by separate One Time Passwords. Taxpayer shall change his user id and password after first login.
- Taxpayer shall require to fill the information required in the application form related details of Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees, Principal Place of Business and details in respect of Authorised signatories.
- Information related to additional place of business, Bank account, commodity in respect of goods and services dealt in (top five) are also required to be filled.
- Applicant need to upload scanned copy of the declaration signed by the Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc. in case he/she declares a person as Authorised Signatory as per Annexure specified. Documents required to be uploaded as evidence are as follows:-

1.	Photographs wherever specified in the Application Form (maximum 10)
	Proprietary Concern – Proprietor
	Partnership Firm / Limited Liability Partnership – Managing/ Authorised
	Partners (personal details of all partners is to be submitted but photos of only ten partners including that of Managing Partner is to be submitted)
	Hindu Undivided Family – Karta
	Company – Managing Director or the Authorised Person
	Trust – Managing Trustee
	Association of Person or Body of Individual –Members of Managing Committee (personal details of all members is to be submitted but photos of only ten members including that of Chairman is to be submitted)
	Local Body – Chief Executive Officer or his equivalent
	Statutory Body – Chief Executive Officer or his equivalent
	Others – Person in Charge
2.	Constitution of business: Partnership Deed in case of Partnership Firm, Registration Certificate/Proof of Constitution in case of Society, Trust, Club, Government Department, Association of Person or Body of Individual, Local Authority, Statutory Body and Others etc.
3.	Proof of Principal/Additional Place of Business:
	(a) For Own premises –
	Any document in support of the ownership of the premises like Latest Property Tax Receipt or Municipal Khata copy or copy of Electricity Bill.
	(b) For Rented or Leased premises –
	A copy of the valid Rent / Lease Agreement with any document in support of the ownership of the premises of the Lessor like Latest Property Tax Receipt or Municipal Khata copy or copy of Electricity Bill.
	(c) For premises not covered in (a) and (b) above –
	A copy of the Consent Letter with any document in support of the ownership of the premises of the Consenter like Municipal Khata copy or Electricity Bill copy. For shared properties also, the same documents may be uploaded.
4	Bank Account Related Proof:
	Scanned copy of the first page of Bank passbook / one page of Bank Statement
	Opening page of the Bank Passbook held in the name of the Proprietor / Business Concern – containing the Account No., Name of the Account Holder, MICR and IFSC and Branch details.
5	For each Authorised Signatory: Letter of Authorisation or copy of Resolution of the Managing Committee or Board of Directors to that effect as specified.

• After submitting information electronic signature shall be required. Following person can electronically sign application for enrolment:-



Constitution of Business	Person who can digitally sign the application
Proprietorship	Proprietor
Partnership	Managing / Authorised Partners
Hindu Undivided Family	Karta
Private Limited Company	Managing / Whole-time Directors and Managing Director/Whole Time Director/ Chief Executive Officer
Public Limited Company	Managing / Whole-time Directors and Managing Director/Whole Time Director/ Chief Executive Officer
Society/ Club/ Trust/ AOP	Members of Managing Committee
Government Department	Person In charge
Public Sector Undertaking	Managing / Whole-time Director and Managing Director/Whole Time Director/ Chief Executive Officer
Unlimited Company	Managing/ Whole-time Director and Managing Director/Whole Time Director/ Chief Executive Officer
Limited Liability Partnership	Designated Partners
Local Authority	Chief Executive Officer or Equivalent
Statutory Body	Chief Executive Officer or Equivalent
Foreign Company	Authorised Person in India
Foreign Limited Liability Partnership	Authorised Person in India
Others	Person In charge

• Application is required to be mandatorily digitally signed as per following:-

Sl. No	Type of Applicant	Digital Signature	required
1.	Private Limited Company Public Limited Company Public Sector Undertaking Unlimited Company Limited Liability Partnership Foreign Company Foreign Limited Liability Partnership	Digital Certificate(DSC) above	Signature Class 2 and

2.	Other than above	Digital Signature Certificate class 2 and above
		e-Signature



Note:- 1. Applicant shall require to register their DSC on common portal.

2. e-Signature facility will be available on the common portal for Aadhaar holders.

All information related to Permanent Account Number, Aadhaar, Director Identification Number, Challan Identification Number, Limited Liability Partnership Identification Number shall be online validated by the system and Acknowledgment Reference Number will be generated after successful validation of all the filled up information.

Status of the online filed Application can be tracked on the common portal.

- 1. Authorised signatory should not be minor.
- 2. No fee is applicable for filing application for enrolment.

#### Acknowledgement

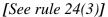
Enrolment Application	on - Foi	rm GST- has been filed against Application Reference Number
(ARN) <>.		
Form Number	:	<>
Form Description	:	<application enrolment="" existing="" for="" of="" taxpayers=""></application>
Date of Filing	:	<dd mm="" yyyy=""></dd>
Taxpayer Trade Nam	e:	<trade name=""></trade>
Taxpayer Legal Nam	e	: <legal as="" by="" center="" name="" shared="" state=""></legal>
Provisional ID Numb	er	: <provisional id="" number=""></provisional>
It is a system	genera	ted acknowledgement and does not require any signature



[See rule – 24(3)]

Reference No. To Provisional ID Name Address	< <date-dd mm="" yyyy="">&gt;</date-dd>
Application Reference Number (ARN) <>	Dated <dd mm="" yyyy=""></dd>
Show Cause Notice for ca	ancellation of provisional registration
This has reference to your application and the same has not been found to be satisful.	on dated The application has been examined factory for the following reasons:-
You are hereby directed to show car to you shall not be cancelled.	use as to why the provisional registration granted
	Signature
Date	Name of the Proper Officer  Designation  Jurisdiction

Place





Reference No. -<< Date-DD/MM/YYYY>> To Name Address GSTIN/ Provisional ID Application Reference No. (ARN) Dated – DD/MM/YYYY Order for cancellation of provisional registration This has reference to your reply dated ---- in response to the notice to show cause dated ----. The Whereas no reply to notice to show cause has been submitted; or Whereas on the day fixed for hearing you did not appear; or

Whereas the undersigned has examined your reply and submissions made at the time of hearing, and is of the opinion that your provisional registration is liable to be cancelled for following reason(s). 1. 2. **Determination of amount payable pursuant to cancellation of provisional registration:** Accordingly, the amount payable by you and the computation and basis thereof is as follows: You are required to pay the following amounts on or before ---- (date) failing which the amount will be recovered in accordance with the provisions of the Act and rules made thereunder. Integrated Cess Head Central Tax UT Tax State Tax Tax Tax Interest Penalty Others Total Place: Date: Signature < Name of the Officer>

Jurisdiction

Designation

[See rule 24(4)]



# <sup>#</sup>[APPLICATION FOR CANCELATION OF REGISTRATION OF MIGRATED TAXPAYERS ] Part A

(i) *[GSTIN]						
(ii) Email ID						
(iii) Mobile Number						
			Part B			
Legal Name (As per Account Number)	r Permanent					
2. Address for correspo	ndence					
Building No./ Flat No.				Floor No.		
Name of Premises/ Building				Road/ Street		
City/Town/ Village/Locality				District		
Block/Taluka						
State				PIN		
3. Reason for Cancellation						
4. Have you issued any t	tax invoice duri	ing C	GST reg	ime? YES		NO
5. Declaration						
(i) I <name of="" pro<="" td="" the=""><td>oprietor/Karta/A</td><td>Auth</td><td>orised S</td><td>Signatory&gt;, being</td><td><desig< td=""><td>nation&gt; of <legal< td=""></legal<></td></desig<></td></name>	oprietor/Karta/A	Auth	orised S	Signatory>, being	<desig< td=""><td>nation&gt; of <legal< td=""></legal<></td></desig<>	nation> of <legal< td=""></legal<>
Name ()> do hereby	y declare that I	am 1	not liab	le to registration un	nder th	e provisions of the
Act.	•			C		1
6. Verification						
I <> hereby solemnly a correct to the best of my				•		
Aadhaar Number		Per	manent	Account Number		
Signature of Authorised	l Signatory					
Full Name						
Designation / Status						
Place						
Date			DD/M	M/YYYY		

<sup>\*</sup>Subs. by Notification No.1763-F.T. dated 10.10.2017 w. e. f. 29.09.2017 for the words "Application For Cancellation Of Provisional Registration"

 $<sup>^*</sup>$ Subs. by Notification No.1763-F.T. dated 10.10.2017 w. e. f. 29.09.2017 for the words "Provisional ID".



[See rule 25]

#### Form for Field Visit Report

Centre Jurisdiction (Ward/Circle/Zone)

Date of Submission of Report:-

Name of the taxable person

GSTIN/UIN-

Task Assigned by:-< Name of the Authority- to be prefilled>

Date and Time of Assignment of task:-< System date and time>

1. Date of Visit  2. Time of Visit  3. Location details:  Latitude  North – Bounded By  West – Bounded By  Whether address is same as mentioned in application.  5. Particulars of the person available at the time of visit  (i) Name  (ii) Father's Name  (iii) Residential Address )  (iv) Mobile Number  (v) Designation / Status  (vi Relationship with taxable person, if applicable.	Sr. No.	Particulars	Input
1. 2. Time of Visit  3. Location details:  Latitude North – Bounded By West – Bounded By  4. Whether address is same as mentioned in application.  5. Particulars of the person available at the time of visit  (i) Name (ii) Father's Name (iii) Residential Address )  (iv) Mobile Number  (v) Designation / Status (vi Relationship with taxable person, if			при
2. 3. Location details:  Latitude North – Bounded By South – Bounded By West – Bounded By  4. Whether address is same as mentioned in application.  5. Particulars of the person available at the time of visit  (i) Name (ii) Father's Name (iii) Residential Address )  (iv Mobile Number )  (v) Designation / Status (vi Relationship with taxable person, if	1.		
Latitude North – Bounded By South – Bounded By West – Bounded By  4. Whether address is same as mentioned in application.  5. Particulars of the person available at the time of visit  (i) Name (ii) Father's Name (iii Residential Address )  (iv Mobile Number )  (v) Designation / Status (vi Relationship with taxable person, if	2.	Time of Visit	
Latitude North – Bounded By West – Bounded By  4. Whether address is same as mentioned in application.  5. Particulars of the person available at the time of visit  (i) Name (ii) Father's Name (iii Residential Address )  (iv Mobile Number )  (v) Designation / Status (vi Relationship with taxable person, if	3	Location details :	
West – Bounded By  4. Whether address is same as mentioned in application.  5. Particulars of the person available at the time of visit  (i) Name  (ii) Father's Name  (iii Residential Address )  (iv Mobile Number )  (v) Designation / Status (vi Relationship with taxable person, if	3.	Latitude	Longitude
4. Whether address is same as mentioned in application.  5. Particulars of the person available at the time of visit  (i) Name  (ii) Father's Name  (iii Residential Address )  (iv Mobile Number )  (v) Designation / Status (vi Relationship with taxable person, if		North – Bounded By	South – Bounded By
4. mentioned in application.  5. Particulars of the person available at the time of visit  (i) Name  (ii) Father's Name  (iii Residential Address )  (iv Mobile Number )  (v) Designation / Status (vi Relationship with taxable person, if		West – Bounded By	East – Bounded By
mentioned in application.  5. Particulars of the person available at the time of visit  (i) Name  (ii) Father's Name  (iii Residential Address )  (iv Mobile Number )  (v) Designation / Status (vi Relationship with taxable person, if	4	Whether address is same as	Y / N
the time of visit  (i) Name  (ii) Father's Name  (iii Residential Address )  (iv Mobile Number )  (v) Designation / Status (vi Relationship with taxable person, if	4.	mentioned in application.	
the time of visit  (i) Name  (ii) Father's Name  (iii Residential Address )  (iv Mobile Number )  (v) Designation / Status (vi Relationship with taxable person, if	5	Particulars of the person available at	
(ii) Father's Name (iii Residential Address ) (iv Mobile Number ) (v) Designation / Status (vi Relationship with taxable person, if	5.	the time of visit	
(iii Residential Address ) (iv Mobile Number ) (v) Designation / Status (vi Relationship with taxable person, if	(i)	Name	
(iv Mobile Number ) (v) Designation / Status (vi Relationship with taxable person, if	(ii)	Father's Name	
(v) Designation / Status (vi Relationship with taxable person, if	(iii	Residential Address	
(v) Designation / Status (vi Relationship with taxable person, if	)		
(vi Relationship with taxable person, if	(iv	Mobile Number	
(vi Relationship with taxable person, if	)		
	(v)	Designation / Status	
) applicable.	(vi	Relationship with taxable person, if	
	)		
6. Functioning status of the business Functioning - Y / N	6.	Functioning status of the business	Functioning - Y / N
7. Details of the premises	7.	Details of the premises	
Open Space Area (in sq m.) -		Open Space Area (in sq m.) -	
(approx.)		(approx.)	
Covered Space Area (in sq m.) -		Covered Space Area (in sq m.) -	
(approx.)			
Floor on which business		Floor on which business	
premises located		-	
8. Documents verified Yes/No	8.	Documents verified	Yes/No
9. Upload photograph of the place with the person who is present at the place	0	Upload photograph of the place with	the person who is present at the place
where site verification is conducted.	٦.		

10.	Comments (not more than < 1000 characters>	
	Signature Place: Officer:	Name of the
	Date:	Designation: Jurisdiction:





#### **#FORM GST REG - 31**

[See rule 21A]

To,	rence No. Date: <dd><mm><yyyy></yyyy></mm></dd>
GST	TIN
Nam	ne:
Addı	ress:
	Intimation for suspension and notice for cancellation of registration
In a	comparison of the following, namely,
(i)	returns furnished by you under section 39 of the West Bengal Goods and Services Tax Act, 2017;
(ii)	outwards supplies details furnished by you in FORM GSTR-1;
(iii)	auto-generated details of your inwards supplies for the periodto;
(iv)	(specify)
and o	other available information, the following discrepancies/ anomalies have been revealed:
	Observation 1
	Observation 2
	Observation 3
(deta	ails to be filled based on the criteria relevant for the taxpayer).

- 2. These discrepancies/anomalies prima facie indicate contravention of the provisions of the West Bengal Goods and Services Tax Act, 2017 and the rules made thereunder, such that if not explained satisfactorily, shall make your registration liable to be cancelled.
- 3. Considering that the above discrepancies/anomalies are grave and pose a serious threat to interest of revenue, as an immediate measure, your registration stands suspended, with effect from the date of this communication, in terms of sub-rule (2A) of rule 21A.
- 4. You are requested to submit a reply to the jurisdictional tax officer within thirty days from the receipt of this notice, providing explanation to the above stated discrepancy/ anomaly. Any possible misuse of your credentials on GST common portal, by any person, in any manner, may also be specifically brought to the notice of jurisdictional officer.
- 5. The suspension of registration shall be lifted on satisfaction of the jurisdictional officer with the reply along with documents furnished by you, and any further verification as jurisdictional officer considers necessary.



6. You may please note that your registration may be cancelled in case you fail to furnish a reply within the prescribed period or do not furnish a satisfactory reply.

Name:

Designation:

NB: This is a system generated notice and does not require signature by the issuing authority.

 $<sup>^{\#}</sup>Form~GST~REG-31~has~been~inserted~by~Notification~No.07-F.T.~dated~04.01.2020~w.e.f.~22.12.2020.$ 



#### Form GST ITC - 01

[See Rule 40(1)]

#### Declaration for claim of input tax credit under sub-section (1) of section 18

Sect	ion 18 (1)(b)			
Section 18 (1)(c)				
Section 18 (1)(d)				
1.	GSTIN			
2.	Legal name			
3.	Trade name, if any			
4.	Date from which liab			
	except section 9 (3) and			
	[For claim under section			
5.	Date of grant of volunt	ary registration	n	

#### 7. Claim under section 18 (1) (a) or section 18 (1)(b)

[For claim made under section 18 (1)(b)]

[For claim made under section 18 (1)(d)]

Date on which goods or services becomes taxable

Claim made under

Section 18 (1)(a)

6.

Details of stock of inputs and inputs contained in semi-finished goods or finished goods on which ITC is claimed

Sr.	GSTIN/ Registrat ion	Invoice *		Description of inputs held in	Unit Quanti ty	Quan tity	Value (As adjusted by debit	Amount of ITC claimed (Rs.)					
	under CX/ VAT of supplier	No.	Date	stock, inputs contained in semi- finished or finished goods held in stock	Code (UQC)		note/credit note)	Central Tax	State Tax	UT Tax	Integrated Tax	Cess	
1	2	3	4	5	6	7	8	9	10	11	12	13	
7 (a)	Inputs held	l in s	stock								•		
7 (b)	Inputs con	taine	ed in se	mi-finished or fi	nished go	ods held	l in stock						

<sup>\*</sup>In case it is not feasible to identify invoice, the principle of first-in-first-out may be followed.

#### 8. Claim under section 18 (1) (c) or section 18 (1)(d)

SERVING ON THAT THOUSE STATE OF THE STATE OF

Details of stock of inputs, inputs contained in semi-finished goods or finished goods and capital goods on which ITC is claimed

Sr. No.	GSTIN/ Registra tion under	egistra Bill of entry		Description of inputs held in stock, inputs contained in	Qty	Value** (As adjusted by debit	Amount of ITC claimed (Rs.)					
	CX/ VAT of supplier	No.	Date	semi-finished or finished goods held in stock, capital goods	(UQC)		note/cre dit note)	Central Tax	State Tax	UT Tax	Integra ted Tax	Ce ss
1	2	3	4	5	6	7	8	9	10	11	12	13
8 (a)	Inputs held	in sto	ck			! 	1					
8 (b)	Inputs con	tained	in semi-	finished or finished	goods held i	n stock						]
8 (c)	   Capital goo	ds in	stock									

<sup>\*</sup> In case it is not feasible to identify invoice, principle of first in and first out may be followed.

- 9. Particulars of certifying Chartered Accountant or Cost Accountant [where applicable]
- a) Name of the Firm issuing certificate
- b) Name of the certifying Chartered Accountant/Cost Accountant
- c) Membership number
- d) Date of issuance of certificate
- e) Attachment (option for uploading certificate)

<sup>\*\*</sup> The value of capital goods shall be the invoice value reduced by five percentage points per quarter of a year or part thereof from the date of invoice



#### 10. Verification

Ι	hereby	solemnly	affirm	and	declare	that	the
information given hereinabove is true and correct to the been concealed there from.	e best of	my knowl	edge and	l belie	ef and no	othing	has
Signature of authorised signatoryName							
Designation/Status							
Datedd/mm/yyyy							



#### Form GST ITC -02

[See Rule – 41(1)]

# Declaration for transfer of ITC in case of sale, merger, demerger, amalgamation, lease or transfer of a business under sub-section (3) of section 18

1.	GSTIN of transferor	
2.	Legal name of transferor	
3.	Trade name, if any	
4.	GSTIN of transferee	
5.	Legal name of transferee	
6.	Trade name, if any	

#### 7. Details of ITC to be transferred

Tax	Amount of matched ITC	Amount of matched ITC to be
	available	transferred
1	2	3
Central		
Tax		
State Tax		
UT Tax		
Integrated		
Tax		
Cess		

- 8. Particulars of certifying Chartered Accountant or Cost Accountant
- a) Name of the Firm issuing certificate
- b) Name of the certifying Chartered Accountant/Cost Accountant
- c) Membership number
- d) Date of issuance of certificate to the transferor
- e) Attachment (option for uploading certificate)

$\sim$	T 7 ' C'	
u	Verification	
	v Ci ili Cationi	

	K. AGRA	<b>A</b>
3. 2.		Com: 74
SERVING G	30	/KK.co
02	ACTITIONERS	To The second

Ι	hereby	solemnly	affirm	and	declare	that	the
information given hereinabove is true and correct to the been concealed there from.	e best of	my knowl	edge and	d belie	ef and no	othing	has
Signature of authorised signatoryName							
Designation/Status							
Datedd/mm/yyyy							



#### **#FORM GST ITC-02**A

[See rule 41A]

#### Declaration for transfer of ITC pursuant to registration under sub-section (2) of section 25

		1	O	
1.	GSTIN of	transferor		
2.	Legal name of transferor			
3.	Trade name of transferor, if any			
4.	GSTIN of t	transferee		
5.	Legal name	e of transferee		
6.	Trade name	e of transferee, if any		
7. De	tails of ITC	to be transferred		
	Tax	Amount of matched ITC avai	ilable	Amount of matched ITC to be transferred
	1	2		3
Cei	ntral Tax			
St	ate Tax			
J	JT Tax			
Integ	grated Tax			
	Cess			
	rification			
	nabove is tru			eby solemnly affirm and declare that the information given e and belief and nothing has been concealed there from.
		orised signatory		
_				
		IS		
	dd/mm/yy			
	ections:	•		

- 1. Transferor refers to the registered person who has an existing registration in a State or Union territory.
- 2. Transferee refers to the place of business for which a separate registration has been obtained under rule 11.

<sup>#</sup> Inserted by Notification No. 173-F.T. dated 29.01.2019 w. e. f. 01.02.2019.



#### Form GST ITC -03

[See rule 44(4)]

Declaration for intimation of ITC reversal/payment of tax on inputs held in stock, inputs contained in semi-finished and finished goods held in stock and capital goods under sub-section (4) of section 18

1. GSTIN	
2. Legal name	
3. Trade name, if any	
4(a). Details of application filed to opt for composition scheme	(i) Application reference number (ARN)
[ applicable only for section 18 (4)]	(ii) Date of filing
4(b). Date from which exemption is effective [applicable only for section 18 (4)]	

5. Details of stock of inputs held in stock, inputs contained in semi-finished or finished goods held in stock, and capital goods on which input tax credit is required to be paid under section 18(4).

Sr. No.	GSTIN/ Registra tion under	*Invo /Bill entry	of	Description of inputs held in stock, inputs contained in	Unit Quantity Code (UQC)	Qty	Value** (As adjusted by debit	Amount of ITC claimed (Rs.)				
	CX/	No.	Date	semi-finished or			note/cre	Central	State	UT	Integra	Ces
	VAT of supplier			finished goods held in stock and			dit note)	Tax	Tax	Tax	ted Tax	S
	заррпет			capital goods							Tax	
1	2	3	4	5	6	7	8	9	10	11	12	13
5 (a)	Inputs held	in sto	ck (whe	re invoice is availab	le)							
5 (b)	Inputs con	tained	in semi-	finished and finishe	d goods hel	d in stoo	ck (where in	voice avai	lable)	•		
5 (c)	Capital goo	ods hel	ld in sto	ck (where invoice av	ailable)	l				I	I.	
5 (d)	Inputs held	in sto	ck and a	as contained in semi	-finished /fi	nished g	goods held i	n stock ( w	here invo	oice no	t available	e)
5 (e)	Capital goo	ds he	ld in sto	ck (where invoice no	ot available)	)		1		1	1	'



- \* (1) In case, it is not feasible to identify invoice, the principle of first in first out may be followed.
- (2) If Invoice is not available for certain inputs or capital goods, the value shall be estimated based on prevailing market price
- \*\* <sup>\$</sup>[The value of capital goods shall be the invoice value reduced by 1/60<sup>th</sup> per month or part thereof from the date of invoice]

#### 6. Amount of ITC payable and paid (based on table 5)

\$Substituted by Notification No. 518-F.T. dated 18.04.2018.

Sr. No.	Description	Tax payable	Paid through Cash/ Credit Ledger	Cash/ Credit entry no.		Amount of ITC paid standard					
			C		Central Tax	State Tax	UT Tax	Integrated Tax	Cess		
1	2	3	4	5	6	7	8	9	10		
1.	Central Tax		Cash Ledger								
			Credit Ledger								
2.	State Tax		Cash Ledger								
			Credit Ledger								
3.	UT Tax		Cash Ledger								
			Credit Ledger								
4.	Integrated Tax		Cash Ledger								
7.			Credit Ledger								
5.	CESS		Cash Ledger								
			Credit Ledger								

7. Verification	
Ihereinabove is true and correct to the best of my kno	hereby solemnly affirm and declare that the information given by
Signature of authorised signatoryName	
Designation/Status Date- dd/mm/yyyy	
	<del>_</del>



#### **#Form GST ITC-04**

[See Rule – 45(3)]

#### Details of goods/capital goods sent to job worker and received back

- 1. GSTIN -
- 2. (a) Legal name -
  - (b) Trade name, if any –

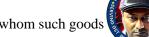
3. Period: Quarter - Year -

4. Details of inputs/capital goods sent for job-work

GSTIN / State in case of	Challan no.	Challan date	Description of goods	UQC	Quantity	Taxable value	Type of goods	R	ate of tax	(%)	
unregistered job- worker	110.	uate	or goods			value	(Inputs/capit al goods)	Central tax	State/ UT tax	Integ rated tax	Cess
1	2	3	4	5	6	7	8	9	10	11	12

- 5. Details of inputs/capital goods received back from job worker or sent out from business place of job-work
  - (A) Details of inputs/ capital goods received back from job worker to whom such goods were sent for job work; and losses and wastes:

GSTIN /	Challan	Date of	Descri	UQC	Quantity	Original	Original	Nature of	Losses	&
State of job	No. issued	challan	ption			challan	challan	job work	wastes	
worker if	by job	issued by	of			No.	date under	done by		
unregistered	worker	job worker	goods			under	which	job	UQC	Quan
	under	under which				which	goods	worker		tity
	which	goods have				goods	have been			
	goods	been				have	sent for			
	have been	received				been sent	job work			
	received	back				for job				
	back					work				
1	2*	3*	4	5	6	7*	8*	9	10	11



(B) Details of inputs / capital goods received back from job worker other than the job worker to whom such goods were originally sent for job work; and losses and wastes:

GSTIN /	Challan	Date of	Descri	UQC	Quantity	Original	Original	Nature of	Losses	&
State of job	No.	challan	ption			challan	challan	job work	wastes	
worker if	issued by	issued by job	of			No.	date under	done by		
unregistered	job	worker under	goods			under	which	job	UQC	Quan
	worker	which goods				which	goods	worker		tity
	under	have been				goods	have been			
	which	received				have	sent for			
	goods	back				been sent	job work			
	have					for job				
	been					work				
	received									
	back									
1	2*	3*	4	5	6	7*	8*	9	10	11

(C) Details of inputs/ Capital goods sent to job worker and subsequently supplied from premises of job worker; and losses and wastes:

GSTIN /	Invoice	Invoice date	Descri	UQC	Quantity	Original	Original	Nature of	Losses	&
State of job	No. in	in case	ption			challan	challan	job work	wastes	
worker if unregistered	case supplied from premises of job worker issued by the	supplied from premises of job worker issued by the Principal	of goods			no. under which goods have been sent for job work	date under which goods have been sent for job work	done by job worker	UQ C	Quan tity
1	Principal 2	3	4	5	6	7*	8*	9	10	11

#### **Instructions:**

- 1. Multiple entry of items for single challan may be filled.
- 2. Columns (2) & (3) in Table (A) and Table (B) are mandatory in cases where fresh challan are required to be issued by the job worker. Otherwise, columns (2) & (3) in Table (A) and Table (B) are optional.
- 3. Columns (7) & (8) in Table (A), Table (B) and Table (C) may not be filled where one-to-one correspondence between goods sent for job work and goods received back after job work is not possible.

#### 6. Verification



I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.

	Signature
Place	Name of Authorised Signatory
Date	Designation
/Status	_

# Subs. by Notification No.1339-F.T. dated 13 .09.2018 w. e. f. 04.09.2018.

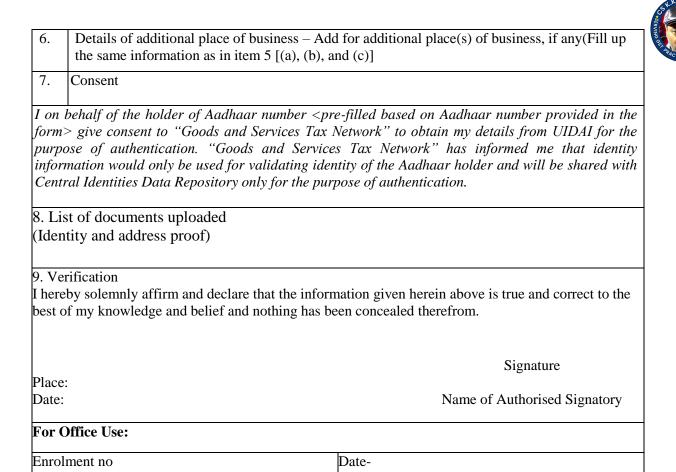


### **#Form GST ENR-01**

# [See Rule 58(1)] Application for Enrolment under section 35 (2)

[only for un-registered persons]

1.	Name o	of the	State											
2.	(a) Leg	al na	me											
	(b) Tra	de Na	ame, if any											
	(c) PA	N												
			(applicable ip concerns											
3.	Type o	f enr	olment		I									
(i) W	arehous	e or I	Depot			(ii) Godowr	1							
(iii)	Franspor	t serv	vices			(iv) Cold St	ora	ige						
4.	Consti	tutio	n of Busines	ss (Please Sele	ect the	Appropriat	e)							
(i) Proprietorship or HUF						(ii) Partnership								
(iii) Company						(iv) Others								
5.	Partic	ulars	of Principa	al Place of Bu	siness									
(a)	Addres	S												
Build	ling No.	or Fl	at No.			Floor No.								
	e of the sises or I	Ruildi	ino			Road or Str	eet							
	or Town		ocality or			Taluka or B	Bloc	ck						
Distr														
State	:					PIN Code								
Latit	ude					Longitude								
<i>(b)</i>	Contac	t Info	ormation (the	e email addres	s and	mobile numb	er 1	will be used j	for authentication	:)				
Emai	il Addre	SS				Telephone	S	TD						
Mob	ile Num	ber				Fax	S	TD						
(c)	Nature	of pr	remises				1							
C	<b>)</b> wn		Leased	Rented	l	Consent		Shared	Others (spec	cify)				



FORM GST ENR-01 is substituted by Notification No.1568-F.T. dated 30.08.2017 w. e. f. 01.07.2017.

#### **##FORM GST ENR-02**



[See Rule 58(1A)]

#### Application for obtaining unique common enrolment number

[Only for transporters registered in more than one State or Union Territory having the same PAN]

1.	(a) Legal name								
	(b) PAN								
		,							
2.Det	tailsof registrations having	the same PAN							
Sl.	GSTIN	Trade Name	State/UT						
No									
3.	Verification								
		d declare that the information given herein and nothing has been concealed therefrom.		ct to the best					
		Sig	nature						
I	Place:	Name of Authorised Signatory							
I	Date:	Designation/Status							
1	<u>For office use – </u>								
I	Enrolment no	Date -							

<sup>\*\*\*</sup> Inserted by Notification No. 836-F.T. dated 25.06.2018 w. e. f. 19.06.2018.



#### Form GSTR-1

[See Rule (59(1)]

<b>Details</b>	of	outward	sup	plies	of	goods	or	services
		0 0-0 11 00-	~			8		

						Yea	ır					
					]	Mo	nth					
				1								
1.		GSTIN										
2.	(a)	Legal name of the registered person										
	(b)	Trade name, if any										
3.	(a)	Aggregate Turnover in the preceding Financial Year										

# $\hbox{\bf 4. Taxable outward supplies made to registered persons (including UIN-holders) other than supplies covered by Table 6 \\$

Aggregate Turnover - April to June, 2017

(b)

(Amount in Rs. for all Tables)

GSTIN/	In	voice d	etails	Rate	Taxable		Place of					
UIN	No.	Date	Value		value	Integrated	Central	State / UT	Cess	Supply		
						Tax	Tax	Tax		(Name of		
										State)		
1	2	3	4	5	6	7	8	9	10	11		
4A.Suppl	4A.Supplies other than those (i) attracting reverse charge and (ii) supplies made through e-commerce operator											
4B.Suppl	4B.Supplies attracting tax on reverse charge basis											
4C.Suppl	ies mac	le throu	igh e-com	merce op	erator attrac	eting TCS (ope	erator wise, 1	rate wise)				
GSTIN of e-commerce operator												

# 5. Taxable outward inter-State supplies to un-registered persons where the invoice value is more than Rs 2.5 lakh

Place of Supply Invoice details Rate Taxable Amount	
---	--

(State)	No.	Date	Value		Value	Integrated Tax	Cess
1	2	3	4	5	6	7	8
5A. Outward sup	plies (oth	er than su	pplies mad	le through e	-commerce (	operator, rate wise)	
				_			
5B.Supplies mad	e through	e-comme	erce operat	or attracting	TCS (opera	tor wise, rate wise)	
GSTIN of e-com	merce op	erator					

## **#6.** Zero rated supplies and Deemed Exports

GSTIN	In	voice de	etails	Shipping		I	Integrated Tax		Central Tax		State /UT Tax		K	Cess	
of				bill/	bill/ Bill of										
recipient				ex	port										
	No.	Date	Value	No.	Date	Rate	Taxable	Amt.	Rate	Taxable	Amt	Rate	Taxable	Amt	
							value			value			value		
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
6A. Export	s														
6B. Supplie	es made	to SEZ	unit or S	EZ Dev	eloper										
6C. Deeme	d expo	rts													

## 7. Taxable supplies (Net of debit notes and credit notes) to unregistered persons other than the supplies covered in Table 5

Rate of tax	Total Taxable	Amount							
	value	Integrated	Central Tax	State Tax/UT Tax	Cess				
1	2	3	4	5	6				
7A. Intra-State supplies									
7A(1).Consolidated rate w	ise outward supplie	es [including suppl	ies made through	e-commerce operator attrac	ting TCS]				
7A (2).Out of supplies mentio TCS(operator wise, rate wise)	oned at 7A(1), value of	of supplies made t	hrough e-Comr	merce Operators attracting	5				
GSTIN of e-commerce ope	rator								
7B. Inter-State Supplies w	es where invoice value is upto Rs 2.5 Lakh [Rate wise]								
7B (1). Place of Supply (N	ame of State)								

						SERV
7B (2). Out of the supplies mentioned in 7B (1), the supplies made through e-Commerce Operators(operatives, rate wise)						
GSTIN of e-commerce open						

## 8. Nil rated, exempted and non GST outward supplies

Description	Nil Rated Supplies	Exempted (Other than Nil rated/non-GST supply)	Non-GST supplies
1	2	3	4
8A.Inter-State supplies to registered persons			
8B.Intra- State supplies to registered persons			
8C.Inter-State supplies to unregistered persons			
8D.Intra-State supplies to unregistered persons			

# 9. Amendments to taxable outwardsupply details furnished in returns for earlier tax periods in Table 4, 5 and 6[including debit notes, credit notes, refund vouchers issued during current period and amendments thereof]

Details	s of ori	ginal	Revised	evised details of document or details of						Taxable		Amount			Place of
do	cumen	t	origin	original Debit/Credit Notes or refund						Value					supply
					V	ouch	ers								
GSTIN	Inv.	Inv.	GSTIN	Inv	oice	Shi	pping bill	Value			Integrated	Central	State / UT	Cess	
	No.										Tax	Tax	Tax		
		Date		No	Date	No.	Date								
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
9A If	the in	voice/	Shipping	ing bill details furnished earlier were			incorre	ect .							
711.11		10100	эшүүше	, 0111		15 141	insiica cai	nor were							
					L										
9B. De	ebit No	otes/C1	redit Not	es/R	efund	vou	cher [origin	nal]							
9C. De	ebit No	tes/C1	edit Notes/Refund voucher [amendments t			hereof]									

## 10. Amendments to taxable outward supplies to unregistered persons furnished in returns for earli tax periods in Table 7

	K. AGRA	
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SERVING C	30	/KK.co
- O	ACTITIONER	100

Rate of tax	Total Taxable			Amount			
	value	Integrated	Central Tax	State/UT Tax	Cess		
1	2	3	4	5	6		
Tax period for which the de	tails are being	<month></month>					
revised							
10A. Intra-State Supplies[inclu	uding supplies made t	hrough e-commer	ce operator attra	acting TCS][Rate wise]			
10A (1).Out of supplies mention rate wise)	ed at 10A, value of su	applies made thro	ugh e-Commerc	ce Operators attracting TC	S(operator wise,		
GSTIN of e-commerce opera	tor						
10B. Inter-State Supplies[incl	uding supplies made	through e-comme	rce operator attra	acting TCS][Rate wise]			
Place of Supply (Name of S	tate)						
10B (1).Out of supplies mentioned at 10B, value of supplies made through e-Commerce Operators attracting TCS(operator wise rate wise)							
GSTIN of e-commerce opera	tor						

## 11. Consolidated Statement of Advances Received/Advance adjusted in the current tax period/ Amendments of information furnished in earlier tax period

Rate	Gross Advance	Place of supply			Amoun	t				
	Received/adjusted	(Name of State)	Integrated	Central	State/UT	Cess				
1	2	3	4	5	6	7				
I Inform	nation for the curr	ent tax period								
	11A. Advance amount received in the tax period for which invoice has not been issued (tax amount to be added to output tax liability)									
11A (1).I	ntra-State supplies(R	Rate Wise)								
11A(2).	Inter-State Supplies	(Rate Wise)			•					
		ved in earlier tax p	eriod and adj	usted agains	st the supplies b	eing shown in this tax period				
in Table l	Nos.4, 5, 6 and 7									
11B (1).	Intra-State Supplies	(Rate Wise)								
11B (2).	Inter-State Supplies	(Rate Wise)								
	dment of informat evised information]	ion furnished in T	Γable No. 11	[1] in GST	R-1 statement f	for earlier tax periods				
Month		Amendment rel No.(select)	ating to info	rmation fu	rnished in S.	11A(1) 11A(2) 11B(1) 11B(2				

## 12. HSN-wise summary of outward supplies

Sr. No.	HSN	Description (Optional	UQC	Total Quantity	<sup>\$</sup> Rate of Tax	Total Taxable		Am	ount	NG OST ARACTI
		if HSN is provided)		Quantity	Tax	Value	Integrated Tax	Central Tax	State/UT Tax	Cess
1	2	3	4	5	6	7	8	9	10	11

## 13. Documents issued during the tax period

Sr. No.	Nature of document	Sr. 1	No.	Total	Cancelled	Net issued
		From	То	number		
1	2	3	4	5	6	7
1	Invoices for outward supply					
2	Invoices for inward supply from unregistered person					
3	Revised Invoice					
4	Debit Note					
5	Credit Note					
6	Receipt voucher					
7	Payment Voucher					
8	Refund voucher					
9	Delivery Challan for job work					
10	Delivery Challan for supply on approval					
11	Delivery Challan in case of liquid gas					
12	Delivery Challan in cases other than by way of supply (excluding at S no. 9 to 11)					

<sup>#</sup> Table 6 has been substituted by Notification No. 2274-F.T. dated 21.12.2017.

### Verification

I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed there from and in case of any reduction in output tax liability the benefit thereof has been/will be passed on to the recipient of supply.

	Signatures
Place	Name of Authorised Signatory
Date	Designation /Status

<sup>\$</sup> Substituted by Notification No. 867-F.T. dated 04.09.2020 w.e.f. 15.10.2020 for "Total value".



#### Instructions -

1. Terms used:

a. GSTIN: Goods and Services Tax Identification Number

b. UIN: Unique Identity Number

c. UQC: Unit Quantity Code

d. HSN: Harmonized System of Nomenclature

e. POS: Place of Supply (Respective State)

f. B to B: From one registered person to another registered person

g. B to C: From registered person to unregistered person

- 2. The details in GSTR-1 should be furnished by 10th of the month succeeding the relevant tax period.
- 3. Aggregate turnover of the taxpayer for the immediate preceding financial year and first quarter of the current financial year shall be reported in the preliminary information in Table 3. This information would be required to be submitted by the taxpayers only in the first year. Quarterly turnover information shall not be captured in subsequent returns. Aggregate turnover shall be auto-populated in subsequent years.
- 4. Invoice-level information pertaining to the tax period should be reported for all supplies as under:
  - (i) For all B to B supplies (whether inter-State or intra-State), invoice level details, rate-wise, should be uploaded in Table 4, including supplies attracting reverse charge and those effected through e-commerce operator. Outwards supply information in these categories are to be furnished separately in the Table.
  - (ii) For all inter-State B to C supplies, where invoice value is more than Rs. 2,50,000/- (B to C Large) invoice level details, rate-wise, should be uploaded in Table 5; and
  - (iii) For all B to C supplies (whether inter-State or intra-State) where invoice value is up to Rs. 2,50,000/- State-wise summary of supplies, rate-wise, should be uploaded in Table 7.
- 5. Table 4 capturing information relating to B to B supplies should:
  - (i) be captured in:
    - a. Table 4A for supplies relating to other than reverse charge/ made through e-commerce operator, rate-wise;
    - b. Table 4B for supplies attracting reverse charge, rate-wise; and
    - c. Table 4C relating to supplies effected through e-commerce operator attracting collection of tax at source under section 52 of the Act, operator wise and rate-wise.
  - (ii) Capture Place of Supply (PoS) only if the same is different from the location of the recipient.

- 6. Table 5 to capture information of B to C Large invoices and other information shall be similar Table 4. The Place of Supply (PoS) column is mandatory in this table.
- 7. Table 6 to capture information related to:
  - (i) Exports out of India
  - (ii) Supplies to SEZ unit/ and SEZ developer
  - (iii) Deemed Exports
- 8. Table 6 needs to capture information about shipping bill and its date. However, if the shipping bill details are not available, Table 6 will still accept the information. The same can be updatedthrough submission of information in relation to amendment Table 9 in the tax period in which the details are available but before claiming any refund / rebate related to the said invoice. The detail of Shipping Bill shall be furnished in 13 digits capturing port code (six digits) followed by number of shipping bill.
- 9. Any supply made by SEZ to DTA, without the cover of a bill of entry is required to be reported by SEZ unit in GSTR-1. The supplies made by SEZ on cover of a bill of entry shall be reported also by DTA unit in its GSTR-2 as imports in GSTR-2. The liability for payment of IGST in respect of supply of services would, be created from this Table..
- 10. In case of export transactions, GSTIN of recipient will not be there. Hence it will remain blank.
- 11. Export transactions effected without payment of IGST (under Bond/ Letter of Undertaking (LUT)) needs to be reported under "0" tax amount heading in Table 6A and 6B.
- 12. Table 7 to capture information in respect of taxable supply of:
  - (i) B to C supplies (whether inter-State or intra-State) with invoice value upto Rs 2,50,000;
  - (ii) Taxable value net of debit/ credit note raised in a particular tax period and information pertaining to previous tax periods which was not reported earlier, shall be reported in Table 10. Negative value can be mentioned in this table, if required;
  - (iii) Transactions effected through e-commerce operator attracting collection of tax at source under section 52 of the Act to be provided operator wise and rate wise;
  - (iv) Table 7A (1) to capture gross intra-State supplies, rate-wise, including supplies made through e-commerce operator attracting collection of tax at source and Table 7A (2) to capture supplies made through e-commerce operator attracting collection of tax at source out of gross supplies reported in Table 7A (1);
  - (v) Table 7B (1) to capture gross inter-State supplies including supplies made through e-commerce operator attracting collection of tax at source and Table 7B (2) to capture supplies made through e-commerce operator attracting collection of tax at source out of gross supplies reported in Table 7B (1); and



(vi) Table 7B to capture information State wise and rate wise.



- 13. Table 9 to capture information of:
  - (i) Amendments of B to B supplies reported in Table 4, B to C Large supplies reported in Table 5 and Supplies involving exports/ SEZ unit or SEZ developer/ deemed exports reported in Table 6;
  - (ii) Information to be captured rate-wise;
  - (iii) It also captures original information of debit / credit note issued and amendment to it reported in earlier tax periods; While furnishing information the original debit note/credit note, the details of invoice shall be mentioned in the first three columns, While furnishing revision of a debit note/credit note, the details of original debit note/credit note shall be mentioned in the first three columns of this Table,
  - (iv) Place of Supply (PoS) only if the same is different from the location of the recipient;
  - (v) Any debit/ credit note pertaining to invoices issued before the appointed day under the existing law also to be reported in this table; and
  - (vi) Shipping bill to be provided only in case of exports transactions amendment.
- 14. Table 10 is similar to Table 9 but captures amendment information related to B to C supplies and reported in Table 7.
- 15. Table 11A captures information related to advances received, rate-wise, in the tax period and tax to be paid thereon along with the respective PoS. It also includes information in Table 11B for adjustment of tax paid on advance received and reported in earlier tax periods against invoices issued in the current tax period. The details of information relating to advances would be submitted only if the invoice has not been issued in the same tax period in which the advance was received.
- 16. Summary of supplies effected against a particular HSN code to be reported only in summary table. It will be optional for taxpayers having annual turnover upto Rs. 1.50 Cr but they need to provide information about description of goods.
- 17. It will be mandatory to report HSN code at two digits level for taxpayers having annual turnover in the preceding year above Rs. 1.50 Cr but upto Rs. 5.00 Cr and at four digits level for taxpayers having annual turnover above Rs. 5.00 Cr.
- \$[18. It will be mandatory to specify the number of digits of HSN code for goods or services that a class of registered persons shall be required to mention as may be specified in the notification issued from time to time under proviso to rule 46 of the said rules.]

<sup>\$</sup> Inserted by notification No. 937-F.T. dated 02.12.2020 w.e.f. 10.11.2020.

## Form GSTR-1A





## **Details of auto drafted supplies**

(From GSTR 2, GSTR 4 or GSTR 6)

				3	Yea	r					
				N	Mor	ıth					
			 				1	ı			
1.	GST	IN									
2.	(a)	Legal name of the registered person									
	(b)	Trade name, if any									

## 3. Taxable outward supplies made to registered persons including supplies attracting reverse charge other than the supplies covered in Table No. 4

GSTIN/	In	voice de	etails	Rate	Taxable		Amou	nt		Place of
UIN	No.	Date	Value		value	Integrated Tax	Central Tax	State / UT Tax	Cess	Supply (Name of State)
1	2	3	4	5	6	7	8	9	10	11
3A. Supp	lies oth	er than	those attra	cting rev	erse charge	(From table 3	of GSTR-2)			
3B. Supp	lies attr	acting r	everse cha	arge (Fro	m table 4A o	of GSTR-2)				

## #4. Zero rated supplies made to SEZ and deemed exports

GSTIN of recipient	Ir	voice de	etails		Integrated Ta	ax	Cess
	No.	Date	Value	Rate	Taxable value	Tax amount	
1	2	3	4	5	6	7	8
4A. Supplies made to SEZ	unit or S	SEZ Deve	loper				
4B. Deemed exports							

## 5. Debit notes, credit notes (including amendments thereof) issued during current period

Details of original	Revised details of document	Rate	Taxable	Place of	Amount of tax
document	or details of original Debit /		value	supply	

				Cı	redit ]	Note			(Name of State)				VINO OST ARACH
GSTIN	No.	Date	GSTIN	No.	Date	Value			State	Integrated Tax		State / UT Tax	Cess
1	2	3	4	5	6	7	8	9	10	11	12	13	14

<sup>#</sup> Table 4 has been substituted by Notification No. 1793-F.T. dated 13.10.2017.

### Verification

I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom and in case of any reduction in output tax liability the benefit thereof has been/will be passed on to the recipient of supply.

	Signatures
Place	Name of Authorised
Signatory	
Date	Designation
/Status	Ç



## Form GSTR-2

[See Rule 60(1)]

Details of inward supplies of goods or services

Year		
Month		

1.	GST	TIN											
2.	(a)	Legal name of the registered person	Au	ito	po	pul	ate	d					
	(b)	Trade name, if any	Au	ito	po	pul	ate	d					

## 3. Inward supplies received from a registered person other than the supplies attracting reverse charge

(Amount in Rs. for all Tables)

GSTIN	Inv	voice o	details	Rate	Taxable	A	Amount of	Tax		Place	Whether input	Amoun	t of ITC	availab	le
of supplier		Date	Value		value	Integrated tax	Central Tax	State/ UT Tax	CESS	of supply (Name of State)	Capital goods	Integrated Tax	Central Tax	State/ UT Tax	Cess
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

4. Inward supplies on which tax is to be paid on reverse charge

GSTIN	Invoice deta	ails Rate	Taxable	A	mount of	Tax		Place of	Whether	Amoun	t of ITC រ	ıvailabl	le
			value					supply	input or				
of									input	Integrated	Central	State/	Cess
supplier					1	1		(Name	service/	Tax	Tax		
	No Date Va	alue		Integrated	Central	State/	CESS	of	Capital			UT	
				tax	_	* **		State)	goods (incl.			Tax	
					Tax	UT			,				
									plant and				

								Tax			machinery)/ Ineligible for ITC				SERVING OS FRACTITIO
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
4A. In	war	d sup	plies r	ecei	ved fron	n a registere	ed suppli	er (attra	acting 1	everse	charge)		1	ı	
4B. In	war	d sup	plies r	eceiv	ved fron	n an unregis	stered sup	oplier							
4C. Im	por	t of s	ervice												
<del>-</del>		·													

## $5. \ \ \textbf{Inputs/Capital goods received from Overseas or from SEZ units on a Bill of Entry}$

GSTIN of	Deta	ails of b entry	ill of	Rate	Taxable value	Am	ount	Whether input / Capital		t of ITC lable
supplier	No.	Date	Value			Integrated Tax	Cess	goods(incl. plant and machinery)/ Ineligible for ITC		Cess
1	2	3	4	5	6	7	8	9	10	11
5A. In	nports									
5B. R	eceive	d from	SEZ					1		
Port code +No of BE=13 digits			Assessab	ole Value						



## 6. Amendments to details of inward supplies furnished in returns for earlier tax periods in Tables 3, 4 and 5 [including debit notes/credit notes issued and their subsequent amendments]

Deta					detail	s of	Rate	Taxable		Amou	nt		Place		Amoun	nt of ITC	C availab	le
origina /Bill o				invo	oice			value					of supply	input or input service/ Capital	Integrated	Central		Cess
GSTIN	No.	Date	GSTIN	No.	Date	Value			Integrated Tax	Central Tax	State/UT Tax	Cess		goods/ Ineligible for ITC)	Tax	Tax	Tax	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
									ods receive incorrec		m SEZ [	Info	rmatic	on furnish	ned in Tab	ole 3 an	nd 4 of	
					_			s or go e incorr		ved fro	om SEZ	[Info	ormatio	on furnis	hed in Tal	ble 5 o	f earlier	
6C. D	)ebi	t No	tes/Cre	dit l	Notes	s [orig	ginal	]										
6D. E	Debi	t No	tes/ Cr	edit	Note	es [am	endı	ment of	debit not	tes/crec	lit notes	furn	ished	in earlier	tax perio	ds]		

## 7. Supplies received from composition taxable person and other exempt/Nil rated/Non GST supplies received

Description		Value of sup	plies received from	
	Composition taxable person	Exempt supply	Nil Rated supply	Non GST supply
1	2	3	4	5
7A. Inter-State supplies				
7B. Intra-state supplies				



### 8. ISD credit received

GSTIN of ISD	ISD Document Details		ISD Credit received				Amount of eligible ITC			
	No.	Date	Integrated	Central	State/	Cess	Integrated	Central	State/UT	Cess
			Tax	Tax	UT Tax		Tax	Tax	Tax	
1	2	3	4	5	6	7	8	9	10	11
8A. ISD Invoice										
8B. ISD Credit Note										
										_

## 9. TDS and TCS Credit received

GSTIN of Deductor /		Sales Return	Net Value		Amount	
GSTIN of e- Commerce Operator	Value			Integrated Tax	Central Tax	State Tax /UT Tax
1	2	3	4	5	6	7
9A. TDS						
9B. TCS						

## 10. Consolidated Statement of Advances paid/Advance adjusted on account of receipt of supply

Rate	Gross Advance	Place of supply (Name of State)			Amount		
	Paid		Integrated Tax	Central Tax	State/UT Tax	Cess	
1	2	3	4	5	6	7	
(I) Info	ormation fo	r the current mon	th				
10A. Adliability)							
10A (1).	Intra-State s	upplies (Rate Wise)					

10A (2).	Inter -State S	Supplies (Rate Wise)	)						ING OST AR
									· CTI
10B. Advance amount on which tax was paid in earlier period but invoice has been received in the current period [ reflected in Table 4 above]									
10B (1). I	10B (1). Intra-State Supplies (Rate Wise)								
10B (2). I	ntra-State Sı	upplies (Rate Wise)							
II Amend	ments of in	nformation furnished in Table No. 10 (I) in an earlier month [Furnish revised information]						tion]	
Month		Amendment	Amendment relating to information furnished in S. No.(select) 10A(1) 10A(2) 10(B1) 10						10B(2)

## 11. Input Tax Credit Reversal / Reclaim

Description for reversal of ITC	To be added to or		Amount	of ITC	
	reduced from	Integrated	Central	State/UT	CESS
	output liability	Tax	Tax	Tax	
1	2	3	4	5	6
A. Information for the current tax period					
(a) Amount in terms of rule 37(2) of ITC Rules	To be added				
(b) Amount in terms of rule 39(1)(j)(ii) of ITC Rules	To be added				
(c) Amount in terms of rule 42 (1) (m) of ITC Rules	To be added				
(d) Amount in terms of rule 43(1) (h) of the ITC Rules	To be added				
(e) Amount in terms of rule 42 (2)(a) of ITC Rules	To be added				
(f) Amount in terms of rule 42(2)(b) of ITC Rules	To be reduced				
(g) On account of amount paid subsequent to reversal of ITC	To be reduced				
(h) Any other liability (Specify)					
	11 11 11 10 11				
B. Amendment of information furnished in T	able No 11 at S. No A	ın an earlier ı	eturn	Т	
Amendment is in respect of information					
furnished in the Month					
Specify the information you wish to amend					
(Drop down)					

## 12. Addition and reduction of amount in output tax for mismatch and other reasons

Description	Add to or		Amount	į	
	reduce from output				
	liability	Integrated	Central	State	CESS

			Tax	Tax	/ UT Tax	ERVING OST ARACTITIONER
	1	2	3	4	5	6
(a)	ITC claimed on mismatched/duplication of invoices/debit notes	Add				
(b)	Tax liability on mismatched credit notes	Add				
(c)	Reclaim on account of rectification of mismatched invoices/debit notes	Reduce				
(d)	Reclaim on account of rectification of mismatched credit note	Reduce				
(e)	Negative tax liability from previous tax periods	Reduce				
(f)	Tax paid on advance in earlier tax periods and adjusted with tax on supplies made in current tax period	Reduce				

## 13. HSN summary of inward supplies

Sr. No.	HSN	Description (Optional	UQC	Total Quantity	Total value	Total Taxable		Amo	ount	
		if HSN is furnished)		Qualitity	varue	Value	Integrated Tax	Central Tax	State/UT Tax	Cess
1	2	3	4	5	6	7	8	9	10	11

## Verification

I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom

	Signatures
Place:	Name of Authorised Signatory
Date:	Designation /Status



#### Instructions -

1. Terms used:

a. GSTIN: Goods and Services Tax Identification Number

b. UIN: Unique Identity Number

c. UQC: Unit Quantity Code

d. HSN: Harmonized System of Nomenclature

e. POS: Place of Supply (Respective State)

f. B to B: From one registered person to another registered person

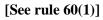
g. B to C: From registered person to unregistered person

#### 2. Table 3& 4 to capture information of:

- (i) Invoice-level inward supply information, rate-wise, pertaining to the tax period reported by supplier in GSTR-1 to be made available in GSTR-2 based on auto-populated details received in GSTR-2A;
- (ii) Table 3 to capture inward supplies other than those attracting reverse charge and Table 4 to capture inward supplies attracting reverse charge;
- (iii) The recipient taxpayer has the following option to act on the auto populated information:
  - a. Accept,
  - b. Reject,
  - c. Modify (if information provided by supplier is incorrect), or
  - d. Keep the transaction pending for action (if goods or services have not been received)
- (iv) After taking the action, recipient taxpayer will have to mention whether he is eligible to avail credit or not and if he is eligible to avail credit, then the amount of eligible credit against the tax mentioned in the invoice needs to be filed;
- (v) The recipient taxpayer can also add invoices (not uploaded by the counterparty supplier) if he is in possession of invoices and have received the goods or services;
- (vi) Table 4A to be auto populated;
- 3. In case of invoices added by recipient tax payer, Place of Supply (PoS) to be captured always except in case of supplies received from registered person, where it is required only if the same is different from the location of the recipient;
- 4. Recipient will have the option to accept invoices auto populated as well as add invoices, pertaining to reverse charge only when the time of supply arises in terms of section 12 or 13 of the Act; and

- 5. Recipient tax payer is required to declare in Column No. 12 whether the inward supplies are input input services or capital goods (including plant and machinery).
- 6. Details relating to import of Goods/Capital Goods from outside India as well as supplied by an SEZ Unit to be reported rate-wise by recipient tax payer in Table 5.
- 7. Recipient to provide for Bill of Entry information including six digits port code and seven digits bill of entry number.
- 8. Taxable Value in Table 5 means assessable value for customs purposes on which IGST is computed (IGST is levied on value plus specified customs duties). In case of imports, the GSTIN would be of recipient tax payer.
- 9. Table 6 to capture amendment of information, rate-wise, provided in earlier tax periods in Table 3, 4 and 5 as well as original/amended information of debit or credit note. GSTIN not to be provided in case of export transactions.
- 10. Table 7 captures information on a gross value level.
- 11. An option similar to Table 3 is not available in case of Table 8 and the credit as distributed by ISD (whether eligible or ineligible) will be made available to the recipient unit and it will be required to redetermine the eligibility as well as the amount eligible as ITC.
- 12. TDS and TCS credit would be auto-populated in Table 9. Sales return and Net value columns are not applicable in case of tax deducted at source in Table 9.
- 13. The eligible credit from Table 3, Table 4 & Table 8 relating to inward supplies to be populated in the Electronic Credit Ledger on submission of its return in Form GSTR-3.
- 14. Recipient can claim less ITC on an invoice depending on its use i.e. whether for business purpose or non-business purpose.
- 15. Information of advance paid pertaining to reverse charge supplies and the tax paid on it including adjustments against invoices issued should be reported in Table 10.
- 16. Table 12 to capture additional liability due to mismatch as well as reduction in output liability due to rectification of mismatch on account of filing of GSTR-3 of the immediately preceding tax period.
- 17. Reporting criteria of HSN will be same as reported in GSTR-1.

## \*FORM GSTR-2A





	<b>Details</b>	of	auto	drafted	supplies
--	----------------	----	------	---------	----------

(From GSTR 1, GSTR 5, GSTR-6, GSTR-7, GSTR-8, import of goods and inward supplies of goods received from SEZ units / developers)

Year		
Month		

1.	GSTI	IN								
2.	(a)	Legal name of the registered person								
	(b)	Trade name, if any								

### PART A

(Amount in Rs. all Tables)

3. Inward supplies received from a registered person including supplies attracting reverse charge

GSTIN	Trade/	Inv	oice	e de	tails	Ra	Taxa	Amoun	t of	tax		Place	Supply	GST	GST	GSTR	Amend	Tax	Effectiv
of	Legal					te	ble					of	attracti	R-	R-1/5	-3B	ment	perio	e date
supplier	name					(%	value					supply	ng	1/5	C:1:	filing	made, if	d in	of
						)						(Nome	reverse	peri	filing	status	any	which	cancella
												(Name of	charge	od	date	(Yes/	(GSTIN	amen	tion, if
		N	Ту	Da	Val			Integr	Cent	Stat	Ce	State/	(Y/N)			No)	,	ded	any
		o.	pe	te	ue			ated	ral	e/	SS	UT)					Others)		
								tax	tax	UT									
										tax									
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
1		5	Т	5	0	,	0	,	10	11	12	13	17	13	10	1 /	10	1)	20

4. Amendment to Inward supplies received from a registered person including supplies attracting reverse charge (Amendment to 3)

Details of	Revised details	Rat	Taxa	Amount of tax	Place	Suppl	GSTR	GSTR	GSTR	Ame	Tax	Effe
original		e	ble		of	у	-1/5	-1/5	-3B	ndme	perio	ctive
Document		(%)	value		suppl v	mg		filing	status		d of origin	
					(Name	revers		aate	(Yes /	(GST	al	canc

																			SERV		E S
														of	e			No)	IN.		<b>at</b>
														State/	charg				Othe.	PACTITIONER	1
														UT)	e				s)		if
															(Y/N)						any,
					1		1				1	1									
No.	Date	GSTI	Trad	No	Typ	Dat	Valu			Integr	Cent	State	Ces								
		N	e /		e	e	e			ated	ral	/ UT	S								
			Lega							tax	tax	tax									
			1																		
			nam																		
			e																		
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22

5. Debit / Credit notes received during current tax period

	GSTI	Trade/	Cr	edit	/ Deb	it N	ote	Rat	Taxa	Amo	unt	of tax		Place	Suppl	GST	GST	GST	Amen	Tax	Effectiv
	N of	Legal		I	Details	S		e	ble					of	у	R-1/5	R-1	R-3B	dment	period in	e date of
	suppli	name						(%)	value					supply	attrac	perio	/5	filing	made,	which	cancella
	er													(Name	ting	d	filing	status	if any	amended	tion, if
														of	rever		date	(Yes/	(GSTI		any
														State/	se		uate	No)	N,		
			No.	Not	Note	Dat	Valu			Inte	Cen	State	Ces	UT)	charg				Others		
				e	suppl	e	e			grat	tral	/ UT	S		e				)		
				tuna	y					ed	tax	tax			(Y/N						
				type	type					tax					)						
-	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
F					-	-	-										-				

6. Amendment to Debit / Credit notes (Amendment to 5)

Details		Rev	vise	d de	tails			Ra	Taxa	Amo	ount c	of tax	ζ.	Pla	Suppl	GST	GST	GST	Amend	Tax	Effectiv
of								te	ble					ce	y	R-	R-	R-	ment	perio	e date
original								(0/2	value					of	attract	1/5	1/5	3B	made	d of	of
documen								(70	varue					supp	ing	peri	filin	filin	(GSTIN	origi	cancella
t								,						ly	revers	od		g	(05111)	nal	tion if
														(Na	e		g date	statu	, Others)	recor	any
														me	charg		uate	S	Others)	d	
														of	e			(Yes			
														Stat	(Y/N)			/			
Ty N Da	CSTI	Tra	N	N	Not	Da	Val			Integra	Cent	Stat		e/				No)			
pe o. te		de /	0.	ot			ue			ted tax			ss	UT)							
1^			0.	e		ic	uc			icu tax		UT	33								
	Suppl ier				sup						ıax										
	101	gal		ιy	ply							tax									
		na																			

					me		pe	type																SERVING OST ARACTI	IONERS
1	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	

## PART B

## 7. ISD credit received

GSTIN	Trade/	ISI	)	ISD	invo	oice	ITC an	nount i	nvolved		GSTR-6	GSTR-6	Amendm	Tax	ITC
of ISD	Legal	docu	me	det	ails (	for					Period	filing	ent made,	Period in	Eligibili
	name	nt		ISI	) cre	dit						date	if any	which	ty
		deta	ils	not	e or	ıly)								amended	
		Туре	ΝIο	Dot	No	Dot	Integ	Cent	State/	Cess					
		1 ype	INO	Dat	NO.	Dat	mileg	Cent	State	Cess					
				e		e	rated	ral	UT						
							tax	tax	tax						
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

## 8. Amendments to ISD credit details

Orig	inal	ISD		Rev	ised (	deta	ils	Orig	ginal	ITC amo	unt invo	lved		ISD	ISD	Amendme	Tax	ITC
Do	cum	ent						IS	$^{5}D$					GSTR	GSTR	nt made	period	Eligibilit
D	etai	ls						inv	oice					-6	-6		of	у
								det	ails					Period	filing		origina	
								(for	ISD						date		1	
								cre	edit								record	
								no	ote									
								on	ly)									
Typ	No	Dat	GSTI	Trade	Typ	No	Dat	No	Dat	Integrate	Centra	State	Ces					
e		e	N of	/	e		e		e	d Tax	1 Tax	/	S					
			ISD	Legal								UT						
				name								Ta						
												X						
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
1	_	3	-	3	O	/	0	,	10	11	12	13	14	13	10	1 /	10	17

## PART- C

## $9. \ TDS \ and \ TCS \ Credit \ (including \ amendments \ thereof) \ received$

GSTIN of	Deductor	Tax	Amount	Value of	Net amount	Amount (Original / Revised)



Deductor / GSTIN of E- Commerce Operator	Name / E- Commerce Operator Name	_	Gross value (Original	supplies returned	liable for TCS	Integrated tax	Central tax	State	/UT tax
1	2	3	4	5	6	7	8		9
9A. TDS									
9B. TCS									
		_	_	_					

## PART- D

## 10. Import of goods from overseas on bill of entry (including amendments thereof)

ICE	EGATE Reference date	Bill of entry details				Amount o	Amended (Yes/ No)	
	dute	Port code	No.	Date	Value	Integrated tax	Cess	
	1	2	3	4	5	6	7	8

## $11. \ Inward \ supplies \ of \ goods \ received \ from \ SEZ \ units \ / \ developers \ on \ bill \ of \ entry \ (including \ amendments \ thereof)$

GSTIN of	Trade /	ICEGATE	F	Bill of E	ntry detai	ls	Amour	t of tax	Amended	
the Supplier	Legal	Reference							(37 / 37 )	
(SEZ)	name	date	Port code	No.	Date	Value	Integrated	Cess	(Yes/No)	
			1 off code	140.	Date	v aruc	tax	CCSS		
1	2	3	4	5	6	7	8	9	10	

## **Instructions**:

- 1. Terms Used:
  - a. ITC Input tax credit
  - b. ISD Input Service Distributor

- 2. **Important Advisory**: FORM GSTR-2A is statement which has been generated on the basis of information furnished by your suppliers in their respective FORMS GSTR-1, 5, 6, 7 and 8. It is a dyn statement and is updated on new addition/amendment made by your supplier in near real time. The details added by supplier would reflect in corresponding FORM GSTR-2A of the recipient irrespective of supplier's date of filing.
- 3. There may be scenarios where a percentage of the applicable rate of tax rate may be notified by the Government. A separate column will be provided for invoices / documents where such rate is applicable.
- 4. Table wise instructions:

Table No. and	<u>Instructions</u>
<u>Heading</u>	
Inward supplies received from a	<ul> <li>The table consists of all the invoices (including invoices on which reverse charge is applicable) which have been saved / filed by your suppliers in their FORM GSTR-1 and 5.</li> </ul>
received from a registered person	ii. Invoice type:
including supplies attracting reverse charge	<ul> <li>a. R- Regular (Other than SEZ supplies and Deemed exports)</li> <li>b. SEZWP- SEZ supplies with payment of tax</li> <li>c. SEZWOP- SEZ supplies without payment of tax</li> <li>d. DE- Deemed exports</li> <li>e. CBW - Intra-State supplies attracting IGST</li> </ul>
	iii. For every invoice, the period and date of FORM GSTR-1/5 in which such invoice has been declared and filed is being provided. It may be noted that the details added by supplier would reflect in corresponding FORM GSTR-2A of the recipient irrespective of supplier's date of filing. For example, if a supplier files his invoice INV-1 dated 10th November 2019 in his FORM GSTR-1 of March 2020, the invoice will be reflected in FORM GSTR-2A of March, 2020 only. Similarly, if the supplier files his FORM GSTR-1 for the month of November on 5th March 2020, the invoice will be reflected in FORM GSTR-2A of November 2019 for the recipient.
	iv. The status of filing of corresponding FORM GSTR-3B for FORM GSTR-1 will also be provided.
	v. The table also shows if the invoice or debit note was amended by the supplier and if yes, then the tax period in which such invoice was amended, declared and filed. For example, if a supplier has filed his invoice INV-1 dated 10 <sup>th</sup> November 2019 in his FORM GSTR-1 of November 2019, the invoice will be reflected in FORM GSTR-2A of November, 2019. If the supplier amends this invoice in FORM GSTR-1 of December 2019, the amended invoice will be made available in Table 4 of FORM GSTR-2A of December 2019. The original record present in Table 3 of FORM GSTR-2A of November 2019 for the recipient will now have updated columns of amendment made (GSTIN, others) and tax period of amendment as December 2019.
	vi. In case, the supplier has cancelled his registration, the effective date of cancellation will be provided.
4 Amendment to Inward supplies	<ul> <li>i. The table consists of amendment to invoices (including invoice on which reverse charge is applicable) which have been saved/filed by your suppliers in their FORM GSTR-1 and 5.</li> </ul>
received from a registered person including supplies	ii. Tax period in which the invoice was reported originally and type of amendment will also be provided. For example, if a supplier has filed his invoice INV-1 dated 10th November 2019 in his FORM GSTR-1 of November 2019, the invoice will be

attracting reverse charge (Amendment to table 3)	reflected in FORM GSTR-2A of November, 2019. If the supplier amends invoice in FORM GSTR-1 of December 2019, the amended invoice will be a available in Table 4 of FORM GSTR-2A of December 2019. The original record present in Table 3 of FORM GSTR-2A of November 2019 for the recipient will now have updated columns of amendment made (GSTIN, others) and tax period of amendment as December 2019.
5 Debit / Credit notes received	<ol> <li>The table consists of the credit and debit notes (including credit/debit notes relating to transactions on which reverse charge is applicable) which have been saved/filed by your suppliers in their FORM GSTR-1 and 5.</li> </ol>
during current tax	ii. If the credit/debit note has been amended subsequently, tax period in which the note has been amended will also be provided.
	iii. Note Type:
	<ul><li>Credit Note</li><li>Debit Note</li><li>iv. Note supply type:</li></ul>
	<ul> <li>R- Regular (Other than SEZ supplies and Deemed exports)</li> <li>SEZWP- SEZ supplies with payment of tax</li> <li>SEZWOP- SEZ supplies without payment of tax</li> <li>DE- Deemed exports</li> <li>CBW - Intra-State supplies attracting IGST</li> </ul>
	v. For every credit or debit note, the period and date of FORM GSTR-1/5 in which such credit or debit note has been declared and filed is being provided. It may be noted that the details added by supplier would reflect in corresponding FORM GSTR-2A of the recipient irrespective of supplier's filing of FORM GSTR-1. For example, if a supplier files his credit note CN-1 dated 10th November 2019 in his FORM GSTR-1 of March 2020, the credit note will be reflected in FORM GSTR-2A of March, 2020 only. Similarly, if the supplier files his FORM GSTR-1 for the month of November on 5th March 2020, the credit note will be reflected in FORM GSTR-2A of November 2019 for the recipient.
	vi. The status of filing of corresponding FORM GSTR-3B of suppliers will also be provided.
	vii. The table also shows if the credit note or debit note has been amended subsequently and if yes, then the tax period in which such credit note or debit note was amended, declared and filed.
	viii. In case, the supplier has cancelled his registration, the effective date of cancellation will be displayed.
6 Amendment to Debit/Credit notes	i. The table consists of the amendments to credit and debit notes (including credit/debit notes on which reverse charge is applicable) which have been saved/filed by your suppliers in their FORM GSTR-1 and 5.
(Amendment to 5)	ii. Tax period in which the note was reported originally will also be provided.
7 ISD credit	i. The table consists of the details of the ISD invoices and ISD credit notes which have been saved/filed by an input service distributor in their FORM GSTR-6.
received	ii. Document Type:
	<ul><li> ISD Invoice</li><li> ISD Credit Note</li></ul>
	iii. If ISD credit note is issued subsequent to issue of ISD invoice, original invoice number and date will also be shown against such credit note. In case document type

	<ul> <li>is ISD Invoice these columns would be blank</li> <li>iv. For every ISD invoice or ISD credit note, the period and date of FORM GSTR-o in which such respective invoice or credit note has been declared and filed is being provided.</li> <li>v. The status of eligibility of ITC on ISD invoices as declared in FORM GSTR-6 will be provided.</li> <li>vi. The status of eligibility of ITC on ISD credit notes will be provided.</li> </ul>
8 Amendment to ISD credit received	i. The table consists of the details of the amendments to details of the ISD invoices and ISD credit notes which have been saved/filed by an input service distributor in their FORM GSTR-6.
9 TDS / TCS credit received	<ul> <li>i. The table consists of the details of TDS and TCS credit from FORM GSTR-7 and FORM GSTR-8 and its amendments in a tax period.</li> <li>ii. A separate facility will be provided on the common portal to accept/ reject TDS and TCS credit.</li> </ul>
10 & 11  Details of Import of goods from overseas on bill of entry and from SEZ units and developers and their respective amendments	<ul> <li>i. The table consists of details of IGST paid on imports of goods from overseas and SEZ units / developers on bill of entry and amendment thereof.</li> <li>ii. The ICEGATE reference date is the date from which the recipient is eligible to take input tax credit.</li> <li>iii. The table also provides if the Bill of entry was amended.</li> <li>iv. Information is provided in the tables based on data received from ICEGATE. Information on certain imports such as courier imports may not be available.</li> </ul>

<sup>\*</sup> Substituted by Notification No.867-F.T. dated 04.11.2020 w.e.f. 15.10.2020 for the following:-

## "FORM GSTR-2A

[See Rule 60(1)]

## Details of auto drafted supplies (From GSTR 1, GSTR 5, GSTR-6, GSTR-7 and GSTR-8)

	(170m OSIN 1, OSIN 3, OS	JIN O	, 05	 , a.	,,,,	351	11 (					
						Ye	ear					
						М	onti	h				
1.	GSTIN											
2.	(a) Legal name of the registered person		1	<u> </u>			<u> </u>	<u> </u>	<u> </u>			
	(b) Trade name, if any											

PART A

## 3. Inward supplies received from a registered person other than the supplies attracting reverse charge



(Amount in Rs. for all Tables)

GSTIN	i	Invoice det	ails	Rate	Taxable		Amour	ıt of tax		Place of supply	
of supplier					value						
	No.	Date	Value			Integrated	Central	State/	Cess		
						tax	Tax	UT Tax			
1	2	3	4	5	6	7	8	9	10	11	

### 4. Inward supplies received from a registered person on which tax is to be paid on reverse charge

GSTIN		Invoice de	tails	Rate	Taxable		Amount	of tax		Place of supply		
of supplier					value							
	No.	Date	Value			Integrated	Central	State/	Cess			
						Tax	Tax	UT Tax				
1	2	3	4	5	6	7	8	9	10	11		

### 5. Debit / Credit notes (including amendments thereof) received during current tax period

Details doci	of orig ument		Revised details of document or details of original Debit / Credit note			Rate	Taxable value	Amount of tax				Place of supply (Name of	
GSTIN	No.	Date	GSTIN	No.	Date	Value			Integrated Tax	Central Tax	State/UT Tax	Cess	State)
1	2	3	4	5	6	7	8	9	10	11	12	13	14

### PART B

### 6. ISD credit (including amendments thereof) received

GSTIN of ISD	ISD doci	ument details	ITC amount involved					
	No.	Date	Integrated Tax	Central Tax	State/	Cess		
					UT Tax			
1	2	3	4	5	6	7		
ISD Invoice –eligible ITC								

ISD Invoice –ineligible ITC			SERVING G	
ISD Credit note –eligible ITC			PRACTI	TIONER
ISD Credit note –ineligible ITC				

## PART- C

## 7. TDS and TCS Credit (including amendments thereof) received

GSTIN of Deductor /					Amount	
GSTIN of e-Commerce Operator	received / Gross Value	Sales Return	Net Value	Integrated Tax	Central Tax	State Tax /UT Tax
1	2	3	4	5	6	7
7A. TDS						
7B. TCS						
						"

## \*FORM GSTR-2B

[See rule 60(7)]

	No Gay	. 9
Year	YYY	
Month		

### **Auto-drafted ITC Statement**

(From FORM GSTR-1, GSTR-5, GSTR-6 and Import data received from ICEGATE)

1. GSTIN	
2(a). Legal name of the registered person	
2(b). Trade name, if any	
2(c). Date of generation	DD/MM/YYYY HH:MM

## 3. ITC Available Summary

(Amount in ₹ in all sections)

S.no.	Heading	GSTR- 3B table	Integrated Tax (₹)	Central Tax (₹)	State/UT tax (₹)	Cess (₹)	Advisory			
Credit v	which may be availed under FORM GS	ГR-3В								
Part A	Part A ITC Available - Credit may be claimed in relevant headings in GSTR-3B									
I	All other ITC - Supplies from registered persons other than reverse charge	4(A)(5)					If this is <b>positive</b> , credit may be availed under Table 4(A)(5) of FORM GSTR-3B.  If this is <b>negative</b> , credit shall be reversed under Table 4(B)(2) of FORM GSTR-3B.			
Details	B2B - Invoices  B2B - Debit notes  B2B - Invoices (Amendment)  B2B - Debit notes (Amendment)									
п	Inward Supplies from ISD	4(A)(4)					If this is <b>positive</b> , credit may be availed under Table 4(A)(4) of FORM GSTR-3B.  If this is <b>negative</b> , credit shall be reversed under Table 4(B)(2) of FORM			

						GSTR-3B.
S	ISD - Invoices					
Details	ISD - Invoices (Amendment)					
Ш	Inward Supplies liable for reverse charge	3.1(d) 4(A)(3)				These supplies shall be <b>declared</b> in Table 3.1(d) of FORM GSTR-3B for payment of tax. Credit may be <b>availed</b> under Table 4(A)(3) of FORM GSTR-3B on payment of tax.
	B2B - Invoices					
ils	B2B - Debit notes					
Details	B2B - Invoices (Amendment)					
	B2B - Debit notes (Amendment)					
IV	Import of Goods	4(A)(1)				If this is <b>positive</b> , credit may be availed under Table 4(A)(1) of FORM GSTR-3B.  If this is <b>negative</b> , credit shall be reversed under Table 4(B)(2) of FORM GSTR-3B.
	IMPG - Import of goods from overseas					
uils	IMPG (Amendment)					
Details	IMGSEZ - Import of goods from SEZ					
	IMGSEZ (Amendment)					
Part B	ITC Reversal - Credit shall be reverse	d in releva	nt headings i	n GSTR-3B	<b>'</b>	
I	Others	4(B)(2)				If this is <b>positive</b> , Credit shall be reversed under Table 4(B)(2) of FORM GSTR-3B. If this is <b>negative</b> , then credit may be reclaimed subject to reversal of the same on an earlier

					instance.
	B2B - Credit notes				
	B2B - Credit notes (Amendment)	_			
S	B2B - Credit notes (Reverse charge)	_			
Details	B2B - Credit notes (Reverse charge) (Amendment)	-			
	ISD - Credit notes	_			
	ISD - Credit notes (Amendment)				

## 4. ITC Not Available Summary

(Amount in ₹ in all sections)

S.no.	Heading	GSTR- 3B Table	Integrated Tax (₹)	Central Tax (₹)	State/UT tax (₹)	Cess (₹)	Advisory			
Credit whi	Credit which may not be availed under FORM GSTR-3B									
Part A	Part A ITC Not Available									
I	All other ITC - Supplies from registered persons other than reverse charge	NA					Such credit shall not be taken in FORM GSTR-3B			
	B2B - Invoices									
ils	B2B - Debit notes									
Details	B2B - Invoices (Amendment)									
	B2B - Debit notes (Amendment)									
II	Inward Supplies from ISD	NA					Such credit shall not be taken in FORM GSTR-3B			
ils	ISD - Invoices									
Details	ISD Amendment - Invoices									

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				The supp shall be
III	Inward Supplies liable for reverse charge	3.1(d)		declared in Table 3.1(d) of FORM GSTR-3B for payment of tax. However, credit will
				not be available on the same.
	B2B - Invoices			
	B2B - Debit notes			
Details				
De	B2B - Invoices (Amendment)			
	B2B - Debit notes (Amendment)			
Part B	ITC Reversal			
Part B	Others	4(B)(2)		Credit shall be <b>reversed</b> under Table 4(B)(2) of FORM GSTR-3B.
		4(B)(2)		be <b>reversed</b> under Table 4(B)(2) of FORM
	Others	4(B)(2)		be <b>reversed</b> under Table 4(B)(2) of FORM
I	Others  B2B - Credit notes	4(B)(2)		be <b>reversed</b> under Table 4(B)(2) of FORM
	Others  B2B - Credit notes  B2B - Credit notes (Amendment)	4(B)(2)		be <b>reversed</b> under Table 4(B)(2) of FORM
I	Others  B2B - Credit notes  B2B - Credit notes (Amendment)  B2B - Credit notes (Reverse charge)  B2B - Credit notes (Reverse charge)	4(B)(2)		be <b>reversed</b> under Table 4(B)(2) of FORM

### Instructions:

- 1. Terms Used:
  - a. ITC Input tax credit
  - b. B2B Business to Business
  - c. ISD Input service distributor
  - d. IMPG Import of goods
  - e. IMPGSEZ Import of goods from SEZ

## 2. Important Advisory:

- a) **FORM GSTR-2B** is a statement which has been generated on the basis of the information furnished your suppliers in their respective **FORMS GSTR-1**, **5 and 6**. It is a static statement and will be a available once a month. The documents filed by the supplier in any **FORMS GSTR-1**, **5 and 6** would reflect in the next open **FORM GSTR-2B** of the recipient irrespective of supplier's date of filing. Taxpayers are advised to refer **FORM GSTR-2B** for availing credit in **FORM GSTR-3B**. However, in case for additional details, they may refer to their respective **FORM GSTR-2A** (which is updated on near real time basis) for more details.
- b) Input tax credit shall be indicated to be non-available in the following scenarios:
  - i. Invoice or debit note for supply of goods or services or both where the recipient is not entitled to input tax credit as per the provisions of sub-section (4) of Section 16 of CGST Act, 2017.
  - ii. Invoice or debit note where the Supplier (GSTIN) and place of supply are in the same State while recipient is in another State.

However, there may be other scenarios for which input tax credit may not be available to the taxpayers and the same has not been generated by the system. Taxpayers, should self-assess and reverse such credit in their **FORM GSTR-3B**.

- 3. It may be noted that **FORM GSTR-2B** will consist of all the **FORM GSTR-1s**, **5s** and **6s** being filed by your suppliers, generally between the due dates of filing of two consequent GSTR-1 or furnishing of IFFs, based on the filing option (monthly or quarterly) as chosen by the corresponding supplier. The dates for which the relevant data has been extracted is specified in the CGST Rules and is also available under the "View Advisory" tab on the online portal. For example, **FORM GSTR-2B** for the month of February will consist of all the documents filed by suppliers who choose to file their **FORM GSTR-1** monthly from 00:00 hours on 12<sup>th</sup> February to 23:59 hours on 11<sup>th</sup> March.
- 4. It also contains information on imports of goods from the ICEGATE system including data on imports from Special Economic Zones Units / Developers.
- 5. It may be noted that reverse charge credit on import of services is not part of this statement and will be continued to be entered by taxpayers in Table 4(A)(2) of **FORM GSTR-3B**.
- 6. Table 3 captures the summary of ITC available as on the date of generation of **FORM GSTR-2B**. It is divided into following two parts:
  - A. Part A captures the summary of credit that may be availed in relevant tables of **FORM GSTR-3B**.
  - B. Part B captures the summary of credit that shall be reversed in relevant table of **FORM GSTR-3B**.
- 7. Table 4 captures the summary of ITC not available as on the date of generation of FORM GSTR-2B. Credit available in this table shall not be availed as credit in FORM GSTR-3B. However, the liability to pay tax on reverse charge basis and the liability to reverse credit on receipt of credit notes continues for such supplies.
- 8. Taxpayers are advised to ensure that the data generated in FORM GSTR-2B is reconciled with their own records and books of accounts. Tax payers shall ensure that
  - a. No credit shall be taken twice for any document under any circumstances.
  - b. Credit shall be reversed wherever necessary.
  - c. Tax on reverse charge basis shall be paid.
- 9. Details of invoices, credit notes, debit notes, ISD invoices, ISD credit and debit notes, bill of entries etc. will also be made available online and through download facility.
- 10. There may be scenarios where a percentage of the applicable rate of tax rate may be notified by the Government. A separate column will be provided for invoices / documents where such rate is applicable.
- 11. Table wise instructions:

Table No. and	Instructions
<u>Heading</u>	

	Service Control of the Control of th
Table 3 Part A Section I All other ITC - Supplies from registered persons other than reverse charge	<ul> <li>i. This section consists of the details of supplies (other than those on which tax is paid on reverse charge basis), which have been declared and filed by your supplied in their FORM GSTR-1 and 5.</li> <li>ii. This table displays only the supplies on which input tax credit is available.</li> <li>iii. Negative credit, if any may arise due to amendment in B2B- Invoices and B2B - Debit notes. Such credit shall be reversed in Table 4(B)(2) of FORM GSTR-3B.</li> </ul>
Table 3 Part A Section II Inward Supplies from ISD	<ul> <li>i. This section consists of the details of supplies, which have been declared and filed by an input service distributor in their FORM GSTR-6.</li> <li>ii. This table displays only the supplies on which ITC is available.</li> <li>iii. Negative credit, if any, may arise due to amendment in ISD Amendments – Invoices. Such credit shall be reversed in table 4(B)(2) of FORM GSTR-3B.</li> </ul>
Table 3 Part A Section III Inward Supplies liable for reverse charge	<ul> <li>i. This section consists of the details of supplies on which tax is to be paid on reverse charge basis, which have been declared and filed by your suppliers in their FORM GSTR-1.</li> <li>ii. This table provides only the supplies on which ITC is available.</li> <li>iii. These supplies shall be declared in Table 3.1(d) of FORM GSTR-3B for payment of tax. Credit may be availed under Table 4(A)(3) of FORM GSTR-3B on payment of tax.</li> </ul>
Table 3 Part A Section IV Import of Goods	<ul> <li>i. This section provides the details of IGST paid by you on import of goods from overseas and SEZ units / developers on bill of entry and amendment thereof. These details are updated on near real time basis from the ICEGATE system.</li> <li>ii. This table shall consist of data on the imports made by you (GSTIN) in the month for which FORM GSTR-2B is being generated for.</li> <li>iii. The ICEGATE reference date is the date from which the recipient is eligible to take input tax credit.</li> <li>iv. The table also provides if the Bill of entry was amended.</li> <li>v. Information is provided in the tables based on data received from ICEGATE. Information on certain imports such as courier imports may not be available.</li> </ul>
Table 3 Part B Section I Others	<ul> <li>i. This section consists of the details of credit notes received and amendment thereof which have been declared and filed by your suppliers in their FORM GSTR-1 and 5</li> <li>ii. Such credit shall be reversed under Table 4(B)(2) of FORM GSTR-3B. If this value is negative, then credit may be reclaimed subject to reversal of the same on an earlier instance.</li> </ul>
Table 4 Part A Section I All other ITC - Supplies from registered persons other than reverse charge	<ul> <li>i. This section consists of the details of supplies (other than those on which tax is to be paid on reverse charge basis), which have been declared and filed by your suppliers in their FORM GSTR-1 and 5.</li> <li>ii. This table provides only the supplies on which ITC is not available.</li> <li>iii. This is for information only and such credit shall not be taken in FORM GSTR-3B.</li> </ul>
Table 4 Part A Section II Inward Supplies from ISD	<ul> <li>i. This section consists of the details supplies, which have been declared and filed by an input service distributor in their FORM GSTR-6.</li> <li>ii. This table provides only the supplies on which ITC is not available.</li> <li>iii. This is for information only and such credit shall not be taken in FORM GSTR-3B.</li> </ul>
Table 4 Part A Section III Inward Supplies liable for reverse charge	<ul> <li>i. This section consists of the details of supplies liable for reverse charge, which have been declared and filed by your suppliers in their FORM GSTR-1.</li> <li>ii. This table provides only the supplies on which ITC is not available.</li> <li>iii. These supplies shall be declared in Table 3.1(d) of FORM GSTR-3B for payment of</li> </ul>

	tax. However, credit will not be available on such supplies.
Table 4 Part B Section I Others	<ul> <li>i. This section consists details the credit notes received and amendment thereof which have been declared and filed by your suppliers in their FORM GSTR-1 and 5</li> <li>ii. This table provides only the credit notes on which ITC is not available.</li> <li>iii. Such credit shall be reversed under Table 4(B)(2) of FORM GSTR-3B.</li> </ul>

<sup>\*</sup>Form GSTR-2B has been inserted by Notification No. 937-F.T. dated 02.12.2020 w.e.f. 10.11.2020.



## Form GSTR-3

[See Rule 61(1)]

## Monthly return

Year		
Month		

1.	GSTIN															
2.	(a)	Legal name of the registered person	Auto Populated													
	(b)	Trade name, if any	A	uto	Po	pul	ate	d								

## Part-A (To be auto populated)

(Amount in Rs. for all Tables)

	(Amount in Ks	. 101 ui	1 1 u	OICS	,							
3. Tu	rnover											
Sr.No.	Type of Turnover	Amount										
1	2	3										
(i)	Taxable [other than zero rated]											
(ii)	Zero rated supply on payment of Tax											
(iii)	Zero rated supply without payment of Tax											
(iv)	Deemed exports											
(v)	Exempted											
(vi)	Nil Rated											
(vii)	Non-GST supply											
	Total											

## 4. Outward supplies

## **4.1 Inter-State supplies (Net Supply for the month)**

Rate	Taxable Value	Amount of Tax								
		Integrated Tax	CESS							
1	2	3	4							
A. Taxab	A. Taxable supplies (other than reverse charge and zero rated supply) [Tax Rate Wise]									

S. K. AGRAWA
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APACTITIONERS!

B. Supplies attracting reverse charge-Tax payable by recipient of supply										
C. Zero rated supply made with payment of Integrated Tax										
	D. Out of the supplies mentioned at A, the value of supplies made though an e-commerce operator attracting TCS-[Rate wise]									
GSTIN of e-commerce operator										

## 4.2 Intra-State supplies (Net supply for the month)

Rate	Taxable Value	Amount of Tax								
		Central Tax	State /UT Tax	Cess						
1	2	3	4	5						
A. Taxabl	e supplies (other than reverse charge) [Tax R	ate wise]								
B. Suppli	es attracting reverse charge- Tax payable by	the recipient of supp	oly							
	C. Out of the supplies mentioned at A, the value of supplies made though an e-commerce operator attracting TCS [Rate wise]									
GSTIN of	e-commerce operator									

## 4.3 Tax effect of amendments made in respect of outward supplies

Rate	Net differential value	Amount of Tax									
		Integrated tax	Central Tax	State/UT Tax	Cess						
1	2	3	4	5	6						
(I) Inter-State supplies  A Taxable supplies (other than reverse charge and Zero Rated supply made with payment of Integrated Tax) [Rate wise]											

Out o	of the Supplies mentioned at A, the	he value of supplie	s made though an e	e-commerce operator	or attracting TCS
II) In	tra-state supplies				
A Taxal	ble supplies (other than reverse of	charge) [Rate wise]			
B Out of	f the supplies mentioned at A, th	e value of supplies	made though an e	-commerce operato	r attracting TCS

## 5. Inward supplies attracting reverse charge including import of services (Net of advance adjustments)

## 5A. Inward supplies on which tax is payable on reverse charge basis

Rate of tax Taxable Value		Amount of tax								
		Integrated Tax	Central Tax	State/UT tax	CESS					
1	2	3	4	5	6					
(I) Inter-State inward supplies [Rate Wise]										
(II) Intra-State inward supplies [Rate Wise]										

## 5B. Tax effect of amendments in respect of supplies attracting reverse charge

Rate of tax Differential		Amount of tax										
	Taxable Value	Integrated Tax	Central Tax	State/UT Tax	CESS							
1	2	3	4	5	6							
(I) Inter-Sta	(I) Inter-State inward supplies (Rate Wise)											
(II) Intra-Sta	(II) Intra-State inward supplies (Rate Wise)											



### 6. Input tax credit

# ITC on inward taxable supplies, including imports and ITC received from ISD[Net of debit notes/credit notes]

Description	Taxable value	Amount of tax				Amount of ITC			
	value	Integrated Tax	Central Tax	State/ UT Tax	CESS	Integrated Tax	Central Tax	State/ UT Tax	CESS
1	2	3	4	5	6	7	8	9	10
(I) On account of supplie	es received a	and debit not	es/credit	notes rece	ived dur	ing the curre	ent tax per	riod	
(a) Inputs									
(b) Input services									
(c) Capital goods									
(II) On account of amenda	ments made	(of the deta	ils furnisł	ned in earli	er tax po	eriods)			
(a) Inputs									
(b) Input services									
(c) Capital goods									

# 7. Addition and reduction of amount in output tax for mismatch and other reasons

	Description	Add to or		Amoui	nt	
		reduce from	Integrated	Central	State /	CESS
		output	tax	tax	UT tax	
		liability				
	1	2	3	4	5	6
(a)	ITC claimed on mismatched/duplication of invoices/debit notes	Add				
(b)	Tax liability on mismatched credit notes	Add				
(c)	Reclaim on rectification of mismatched invoices/Debit Notes	Reduce				
(d)	Reclaim on rectification of mismatch credit note	Reduce				
(e)	Negative tax liability from previous tax periods	Reduce				
(f)	Tax paid on advance in earlier tax periods and adjusted with tax on supplies made in current tax period	Reduce				
(g)	Input Tax credit reversal/reclaim	Add/Reduce				

# 8. Total tax liability

Rate of Tax	Taxable value	Amount of tax

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	ACTITIONERS	

		Integrated tax	Central tax	State/UT Tax	CESS
1	2	3	4	5	6
8A. On outward supp	lies				
8B. On inward suppli	es attracting reverse charge				
8C. On account of Inp	out Tax Credit				
Reversal/reclaim					
8D. On account of mi reasons	smatch/ rectification /other				

#### 9. Credit of TDS and TCS

		Amount					
		Integrated tax	Central tax	State/ UT Tax			
	1	2	3	4			
(a)	TDS						
(b)	TCS						

#### 10. Interest liability (Interest as on ......)

On account of	Output	ITC	On	Undue exces	Credit of	Interest	Delay in	Total
	liability	claimed on	account	claims or	interest on	liability	payment	interest
	on	mismatched	of other	excess	rectification of	carry	of tax	liability
	mismatch	invoice	ITC	reduction	mismatch	forward		
			reversal	[refer sec 50(3)]				
1	2	3	4	5	6	7	8	9
(a) Integrated Tax								
(b) Central Tax								
(c) State/UT Tax								
(d) Cess								

#### 11. Late Fee



On account of	Central Tax	State/UT tax
1	2	3
Late fee		

#### Part B

# 12. Tax payable and paid

Description	Tax payable	Paid in cash		Tax Paid			
	1 3		Integrated Tax	Central Tax	State/UT Tax	Cess	
1	2	3	4	5	6	7	8
(a) Integrated Tax							
(b) Central Tax							
(c) State/UT Tax							
(d) Cess							

# 13. Interest, Late Fee and any other amount (other than tax) payable and paid

Description	Amount payable	Amount Paid
1	2	3
(I) Interest on account of		
(a) Integrated tax		
(b) Central Tax		
(c) State/UT Tax		
(d) Cess		
II Late fee	-	
(a) Central tax		
(b) State/UT tax		

# 14. Refund claimed from Electronic cash ledger

Description	Tax	Interest	Penalty	Fee	Other	Debit Entry Nos.
1	2	3	4	5	6	7
(a) Integrated tax						

(b)	Central Tax				SEPUNO OF THE OFFICE OFFICE OFFICE OF THE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE OF	NERS TO
(c)	State/UT Tax					
(d)	Cess					
Ban	k Account Details (Drop	Down)				

# **15. Debit entries in electronic cash/Credit ledger for tax/interest payment [to** be populated after payment of tax and submissions of return]

Description	Tax paid in		Interest	Late fee			
	cash	Integrated tax   Central Tax   State		State/UT Tax Cess			
1	2	3	4	5	6	7	8
(a) Integrated tax							
(b) Central Tax							
(c) State/UT Tax							
(d) Cess							

#### Verification

I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.

	Signatures of Authorised Signatory
Place	Name of Authorised Signatory
Date	Designation /Status



#### **Instructions:-**

- 1. Terms Used:
  - a) GSTIN:- Goods and Services Tax Identification Number
  - b) TDS:- Tax Deducted at source c) TCS:- Tax Collected at source
- 2. GSTR 3 can be generated only when GSTR-1 and GSTR-2 of the tax period have been filed.
- 3. Electronic liability register, electronic cash ledger and electronic credit ledger of taxpayer will be updated on generation of GSTR-3 by taxpayer.
- 4. Part-A of GSTR-3 is auto-populated on the basis of GSTR 1, GSTR 1A and GSTR 2.
- 5. Part-B of GSTR-3 relates to payment of tax, interest, late fee etc. by utilising credit available in electronic credit ledger and cash ledger.
- 6. Tax liability relating to outward supplies in Table 4 is net of invoices, debit/credit notes and advances received.
- 7. Table 4.1 will not include zero rated supplies made without payment of taxes.
- 8. Table 4.3 will not include amendments of supplies originally made under reverse charge basis.
- 9. Tax liability due to reverse charge on inward supplies in Table 5 is net of invoices, debit/credit notes, advances paid and adjustments made out of tax paid on advances earlier.
- 10. Utilization of input tax credit should be made in accordance with the provisions of section 49.
- 11. GSTR-3 filed without discharging complete liability will not be treated as valid return.
- 12. If taxpayer has filed a return which was not valid earlier and later on, he intends to discharge the remaining liability, then he has to file the Part B of GSTR-3 again.
- 13. Refund from cash ledger can only be claimed only when all the return related liabilities for that tax period have been discharged.
- 14. Refund claimed from cash ledger through Table 14 will result in a debit entry in electronic cash ledger on filing of valid GSTR 3.



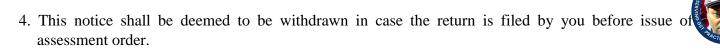
#### Form GSTR - 3A

[See rule 68]

Re	eference No:		Date:
	O GSTIN Name Address		
		n defaulter u/s 46 for not filing return	
Ta	ax Period - Type	e of Return -	
		are required to furnish return for the supplications aforesaid tax period by due date. It has been	
2.	may] be assessed u/s 62 of the Act, b	ish the said return within 15 days failing ased on the relevant material available with will also be liable to pay interest and pen	h this office. Please note
3.	Please note that no further communication	tion will be issued for assessing the liabilit	y.
4.	The notice shall be deemed to have before issue of the assessment order.	been withdrawn in case the return referred	d above, is filed by you
*[5	5. This is a system generated notice and	does not require signature.]	
	Notice to return defaulter u/s 46 t	Or For not filing final return upon cancellation	on of registration
		•	
	Cancellation order No Application Reference Number, if	Date any - Date -	
		1 6 '4 4' 11 4' 6	

Consequent upon applying for surrender of registration or cancellation of your registration for the reasons specified in the order, you were required to submit a final return in form **GSTR-10** as required under section 45 of the Act.

- 2. It has been noticed that you have not filed the final return by the due date.
- 3. You are, therefore, requested to furnish the final return as specified under section 45 of the Act within 15 days failing which your tax liability for the aforesaid \$[tax period may] be determined in accordance with the provisions of the Act based on the relevant material available with or gathered by this office. Please note that in addition to tax so assessed, you will also be liable to pay interest as per provisions of the Act.



\*[5. This is a system generated notice and does not require signature.]

Signature Name Designation

<sup>\*\*</sup>Substituted by notification No. 40-F.T. dated 07.01.2020 w.e.f. 01.01.2020 for "tax liability shall".

<sup>\$</sup> Substituted by ibid w.e.f. 01.01.2020 for "tax period shall".

<sup>\*</sup> Inserted by ibid w.e.f. 01.01.2020.



#### **FORM GSTR-3B**

[See rule 61(5)]

		Year
		Month
1.	GSTIN	
2.	Legal name of the registered person	Auto Populated

#### 3.1 Details of Outward Supplies and inward supplies liable to reverse charge

Nature of Supplies	Total Taxable value	Integrated Tax	Central Tax	State/UT Tax	Cess
1	2	3	4	5	6
(a) Outward taxable supplies (other than zero rated, nil rated and					
exempted)					
(b) Outward taxable supplies (zero rated )					
(c) Other outward supplies (Nil rated, exempted)					
(d) Inward supplies (liable to reverse charge)					
(e) Non-GST outward supplies					

# 3.2 Of the supplies shown in 3.1 (a) above, details of inter-State supplies made to unregistered persons, composition taxable persons and UIN holders

	Place of Supply (State/UT)	Total Taxable value	Amount of Integrated Tax
	1	2	3
Unregistered Persons			
Composition Taxable Persons			
UIN holders			

#### 4. Eligible ITC

Details	Integrated Tax	Central Tax	State/UT Tax	Cess
1	2	3	4	5
(A) ITC Available (whether in full or part)				
(1) Import of goods				
(2) Import of services				
(3) Inward supplies liable to reverse charge (other than 1 &2				
above)				
(4) Inward supplies from ISD				
(5) All other ITC				
(B) ITC Reversed				
(1) As per Rule 42&43 of ITC rules				
(2) Others				
(C) Net ITC Available (A) – (B)				
(D) Ineligible ITC				
(1) As per section 17(5)				
(2) Others				



#### 5. Values of exempt, nil-rated and non-GST inward supplies

Nature of supplies	Inter-State supplies	Intra-State supplies
1	2	3
From a supplier under composition scheme, Exempt and Nil rated supply		
Non GST supply		

#### 6.1 Payment of tax

Description	Tax payable	Paid through ITC				Tax paid TDS./TCS	Tax/Cess paid in	Interest	Late Fee
	payaoie	Integrated Tax	Central Tax	State/UT Tax	Cess	103./103	cash		
1	2	3	4	5	6	7	8	9	10
Integrated Tax									
Central Tax									
State/UT Tax									
Cess									

#### 6.2 TDS/TCS Credit

Details	Integrated Tax	Central Tax	State/UT Tax
1	2	3	4
TDS			
TCS			

#### Verification (by Authorised signatory)

I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed there from.

#### **Instructions:**

- 1) Value of Taxable Supplies = Value of invoices + value of Debit Notes value of credit notes + value of advances received for which invoices have not been issued in the same month value of advances adjusted against invoices
- 2) Details of advances as well as adjustment of same against invoices to be adjusted and not shown separately
- 3) Amendment in any details to be adjusted and not shown separately.



#### **#FORM GSTR-4**

[See rule 62]

Return for financial year of registered person who has opted for composition levy or availing benefit of notification No. 377-F.T. [02/2019- State Tax (Rate)]

**GSTIN** 

Legal name of the registered person

1.

Year

<Auto>

	(b)	Trade name, if any							<auto></auto>			
3.	(a)	Aggregate turnover in the preceding Financial Year (Auto populated)										
	(b)	ARN						<au< td=""><td>ito&gt;(</td><td>after filing)&gt;</td><td><u> </u></td><td></td></au<>	ito>(	after filing)>	<u> </u>	
	(c)	Date of	of ARN					<au< td=""><td>ıto&gt;(</td><td>after filing)&gt;</td><td></td><td></td></au<>	ıto>(	after filing)>		
4. 1	nwarc	i ciinnli					4 • 4 1	• •		1		
		ւ ջաբբո	es inciu	iding su	pplies	on which	tax is to be	paid	on r	everse charge		
GS	STIN		roice det		Rate	Taxable	tax is to be			nt of tax		Place of
	STIN of						tax is to be					supply
	STIN					Taxable	Integrated Tax		mour			

4A. Inward supplies received from a registered supplier (other than supplies attracting reverse charge)

4B. Inward supplies received from a registered supplier (attracting reverse charge)

4C. Inward supplies received from an unregistered supplier

4D. Import of service



# 5. Summary of self-assessed liability as per FORM GST CMP-08

(Net of advances, credit and debit notes and any other adjustment due to amendments etc.)

Sr.	Description	Value		Amoun	t of tax	
No.			Integrated tax	Central tax	State/ UT tax	Cess
1	2	3	4	5	6	7
1.	Outward supplies (including exempt supplies)	<auto></auto>	<auto></auto>	<auto></auto>	<auto></auto>	<auto></auto>
2.	Inward supplies attracting reverse charge including import of services	<auto></auto>	<auto></auto>	<auto></auto>	<auto></auto>	<auto></auto>
3.	Tax paid (1+2)	<auto></auto>	<auto></auto>	<auto></auto>	<auto></auto>	<auto></auto>
4.	Interest paid, if any	<auto></auto>	<auto></auto>	<auto></auto>	<auto></auto>	<auto></auto>

# 6. Tax rate wise details of outward supplies / inward supplies attracting reverse charge during the year (Net of advances, credit and debit notes and any other adjustment due to amendments etc.)

Sr.	Type of	Rate of tax	Value	Amount of tax				
No.	supply (Outward/ Inward)	(%)		Integrated tax	Central tax	State/ UT tax	Cess	
1	2	3	4	5	6	7	8	
				<auto></auto>	<auto></auto>	<auto></auto>	<auto></auto>	
				<auto></auto>	<auto></auto>	<auto></auto>	<auto></auto>	
				<auto></auto>	<auto></auto>	<auto></auto>	<auto></auto>	
		Total		<auto></auto>	<auto></auto>	<auto></auto>	<auto></auto>	

#### 7. TDS/TCS Credit received

GSTIN of Deductor / e-	Gross Value	Amount



commerce operator		Central Tax	State/UT Tax
1	2	3	4

# 8. Tax, interest, late fee payable and paid

Sr. No.	Type of tax	Tax amount payable (As per table 6)	Tax Amount already paid (Through FORM GST CMP-08)	Balance amount of tax payable, if any (3-4)	Interest payable	Interest paid	Late fee payable	Late fee paid
1	2	3	4	5	6	7	8	9
1.	Integrated tax	<auto></auto>	<auto></auto>	<auto></auto>				
2.	Central tax	<auto></auto>	<auto></auto>	<auto></auto>				
3.	State/UT tax	<auto></auto>	<auto></auto>	<auto></auto>				
4.	Cess	<auto></auto>	<auto></auto>	<auto></auto>				

# 9. Refund claimed from Electronic cash ledger

Description	Tax	Interest	Penalty	Fee	Other	Debit Entry Nos.			
1	2	3	4	5	6	7			
(a) Integrated tax									
(b) Central Tax									
(c) State/UT Tax									
(d) Cess									
Bank Account Details	Bank Account Details (Drop Down)								

#### Verification

I hereby solemnly affirm and declare that the information given hereinabove is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.



#### Signature of Authorised Signatory

Name of Authorised Signatory

Designation /Status

Place

Date

#### **Instructions:-**

1. Terms used:

(a) GSTIN: Goods and Services Tax Identification Number

(b) TDS: Tax Deducted at Source

(c) TCS: Tax Collected at Source

- 2. The details in **FORM GSTR-4**, for every financial year or part thereof, should be furnished till the thirtieth day of April following the end of such financial year.
- 3. Aggregate turnover of the taxpayer for the immediate preceding financial year would be auto-populated.
- 4. Table 4 to capture information, on a consolidated basis, related to inward supplies, rate-wise, GSTIN wise:
  - (i) Table 4A to capture inward supplies from registered supplier other than those attracting reverse charge;
  - (ii) Table 4B to capture inward supplies from registered supplier attracting reverse charge;
  - (iii) Table 4C to capture supplies from unregistered supplier;
  - (iv) Table 4D to capture import of services.
- 5. Table 5 to capture details (and adjustments thereof) of outward supplies (including exempt supplies) and inward supplies attracting reverse charge including import of services as declared earlier in FORM GST CMP-08 during the financial year.
- 6. TDS/TCS credit received from deductor/e-commerce operator would be auto-populated in Table 7.

\*Form GSTR-4 has been Substituted by Notification No. 1090-F.T. dated 28.06.2019 w. e. f. 28.06.2019.

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#### Form GSTR-4A

[See Rule 59(3)& 66(2)]

# Auto-drafted details for registered person opting for composition levy

(Auto-drafted from GSTR-1, GSTR-5 and GSTR-7)

				Year					
				Quarter					
1.	GSTIN								
2.	(a) Legal name of the registe	red person	Auto Populate	ed					
	(b) Trade name, if any		Auto Populate	Auto Populated					

# 3. Inward supplies received from registered person including supplies attracting reverse charge

of supplier	Inv	oice det	ails	Rate	Taxable value	Amount of tax				Place of supply (Name of
Барриог	No.	Date	Value			Integrated Tax	Central Tax	State/UT Tax	Cess	State)
1	2	3	4	5	6	7	8	9	10	11
3A. Inw	ard sup	plies rec	eived fr	om a r	egistered :	supplier (oth	er than supp	lies attracting 1	reverse ch	arge)
3B. Inw	ard sup	plies rec	eived fro	om a r	egistered s	supplier (attr	acting rever	rse charge)		

# 4. Debit notes/credit notes (including amendments thereof) received during current period

Details o	of orig		docur	nent o nal De	ebit / C	s of ails of Credit	Rate	Taxable value		Amount of tax			Place of supply (Name of State)
GSTIN	No.	Date	GSTIN		Date	Value			Integrated Tax	Central Tax	State/UT Tax	Cess	
1	2	3	4	5	6	7	8	9	10	11	12	13	14

(5)	K. AGRAWA	
ž,		
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NO G	3	
93		

# 5. TDS Credit received

GSTIN of deductor	Gross value	Amount of tax		
		Central Tax	State/UT Tax	
1	2	3	4	

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#### Form GSTR-5

[See Rule 60(4A)]

#### **Return for Non-resident taxable person**

Year		
Month		

1.	GSTIN						
2.	(a)	Legal name of the registered person	Auto Populated				
	(b)	Trade name, if any	Auto Populated				
	(c)	Validity period of registration	Auto Populated				
	*[(d)	ARN	Auto Populated				
	(e)	Date of ARN	Auto Populated]				

 $<sup>* \</sup>textit{Inserted by Notification No.867-F.T. dated 04.11.2020 w.e.f. 15.10.2020}.$ 

# 3. Inputs/Capital goods received from Overseas (Import of goods

(Amount in Rs. for all Tables)

Detail	ls of bill o	f entry	Rate	Taxable	Amount		Amount of ITC	Cavailable
No.	Date	Value	1	value	Integrated Tax	Cess	Integrated Tax	Cess
1	2	3	4	5	6	7	8	9

# 4. Amendment in the details furnished in any earlier return

Orig	inal details					Revised	details				Differentia	
Bil	l of entry	Bill	of entr	У	Rate	Taxable value	Amou	nt	Amount availa		(+/_)	,
No	Date	No	Date	Value			Integrated Tax	Cess	Integrated Tax	Cess	Integrated tax	Cess
1	2	3	4	5	6	7	8	9	10	11	12	13

						See
						TRO GO ARACTITIONERS A

#### 5. Taxable outward supplies made to registered persons (including UIN holders)

GSTIN/	Ir	voice de	etails	Rate	Taxable		Amount			Place of
UIN	No.	Date	Value		value	Integrated	Central	State /	Cess	Supply
						Tax	Tax	UT		(Name of
								Tax		State)
1	2	3	4	5	6	7	8	9	10	11

#### 6. Taxable outward inter-State supplies to un-registered persons where invoice value is more than Rs 2.5 lakh

Place of Supply		Invoice de	etails	Rate	Taxable Value	Amou	int
(State)	No.	Date	Value			Integrated Tax	Cess
1	2	3	4	5	6	7	8

# 7. Taxable supplies (net of debit notes and credit notes) to unregistered persons other than the supplies mentioned at Table 6

Rate of tax	Total Taxable		Aı	mount	
	value	Integrated Tax	Central Tax	State /UT Tax	Cess
1	2	3	4	5	6
7A. Intra-State supply	y (Consolidated, ra	te wise)			
7B. Inter-State Suppl	lies where the valu	ie of invoice is upt	to Rs 2.5 Lakh	[Rate wise]	
Place of Supply (Name	e of State)				

8. Amendments to taxable outward supply details furnished in returns for earlier tax periods in Table 5 and 6 [including debit note/credit notes and amendments thereof]

Table 5 and 6 Intera	aing actit note, create note,	Juliu	unichan	nents thereof	
Details of original	Revised details of document	Rate	Taxable	Amount	Place of
document	or		Value		supply
	details of original Debit/Credit Notes				

GSTIN	No.	Date	GSTI	No.	Date	Value			Integrated	Central	State /	Cess	VING GS
			N						Tax	Tax	UT Tax		PR
1	2	3	4	5	6	7	8	9	10	11	12	13	14
BA. If the	e invoic	ce detai	ls furnis	hed ea	ırlier we	re incorre	ect						
BB. Debit	Notes/	Credit	Notes [c	rigina	1)]								
8C. Debit	Notes/	Credit	Notes [a	mend	ment of	debit not	es/cre	dit notes	furnished in	n earlier t	ax periods	s]	
		1											

# 9. Amendments to taxable outward supplies to unregistered persons furnished in returns for Earlier tax periods in Table $7\,$

Rate of tax	Total taxable		Amo	unt	
	value	Integrated Tax	Central Tax	State / UT Tax	Cess
1	2	2	1	5	6
1	2	3	4	3	6
Tax period for which	h the details ar	e being revised			
9A. Intra-State Suppl	lies [Rate wise]				
9B. Inter-State Supp	lies [Rate wise]	]			
Place of Supply (Na	ame of State)				

# 10. Total tax liability <sup>@</sup>[(including reverse charge liability, if any)]

	Taxable		Am	ount of tax	
Rate of Tax	value	Integrated Tax	Central Tax	State/UT Tax	CESS
1	2	3	4	5	6
10A. On accou	int of outward	supply			
10B. On accou	nt of differenti	al ITC being	negative ii	n Table 4	
<sup>®</sup> [10C. On accou	ınt of inward suj	pplies liable to	reverse cha	arge	
					]



# 11. Tax payable and paid

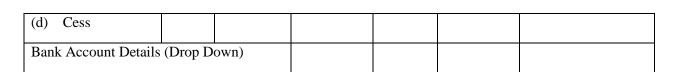
Description	Tax payable	Paid in cash	Paid thro	ugh ITC	Tax Paid
			Integrated tax	Cess	
1	2	3	4	5	6
(a) Integrated Tax					
(b) Central Tax					
(c) State/UT Tax					
(d) Cess					

#### 12. Interest, late fee and any other amount payable and paid

Description	Amount payable	Amount paid
1	2	3
I Interest on account	of	
(a) Integrated tax		
(b) Central Tax		
(c) State/UT Tax		
(d) Cess		
II Late fee on accoun	t of	
(a) Central tax		
(b) State / UT tax		

# 13. Refund claimed from electronic cash ledger

Description	Tax	Interest	Penalty	Fee	Other	Debit Entry Nos.
1	2	3	4	5	6	7
(a) Integrated tax						
(b) Central Tax						
(c) State/UT Tax						





# 14. Debit entries in electronic cash/credit ledger for tax/interest payment [to be populated after payment of tax and submissions of return]

Description	Tax paid in cash	Tax paid thro	Interest	Late fee	
	Casii	Integrated tax	Cess		
1	2	3	4	5	6
(a) Integrated tax					
(b) Central Tax					
(c) State/UT Tax					
(d) Cess					

#### Verification

I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.

	Signatures of Authorised Signatory
Place	Name of Authorised Signatory
Date	Designation /Status

#### **Instructions:-**



- 1. Terms used:
  - a. GSTIN: Goods and Services Tax Identification Number
  - b. UIN: Unique Identity Number
  - c. UQC: Unit Quantity Code
  - d. HSN: Harmonized System of Nomenclature
  - e. POS: Place of Supply (Respective State)
  - f. B to B: From one registered person to another registered person
  - g. B to C: From registered person to unregistered person
- 2. GSTR-5 is applicable to non-resident taxable person and it is a monthly return.
- 3. The details in GSTR-5 should be furnished by 20<sup>th</sup> of the month succeeding the relevant tax period or within 7 days from the last date of the registration whichever is earlier.
- 4. Table 3 consists of details of import of goods, bill of entry wise and taxpayer has to specify the amount of ITC eligible on such import of goods.
- 5. Recipient to provide for Bill of Entry information including six digits port code and seven digits bill of entry number.
- 6. Table 4 consists of amendment of import of goods which are declared in the returns of earlier tax period.
- \$[7. Invoice-level information, rate-wise, pertaining to the tax period should be reported as under:
  - (i.) for all B to B supplies (whether inter-State or intra-State), invoice level details should be uploaded in Table 5;
  - (ii.) for all inter-state B to C supplies, where invoice value is more than Rs. 2,50,000/- (B to C Large) invoice level detail to be provided in Table 6; and
  - (iii.) for all B to C supplies, other than those reported in table 6, shall be reported in Table 7 providing State-wise summary of such supplies.]
- 8. Table 8 consists of amendments in respect of
  - i. B2B outward supplies declared in the previous tax period;
  - ii. "B2C inter-State invoices where invoice value is more than <sup>&</sup>[rupees ] 2.5 lakhs" reported in the previous tax period; and
  - iii. Original Debit and credit note details and its amendments.
- 9. Table 9 covers the Amendments in respect of B2C outward supplies other than inter-State supplies where invoice value is more than Rs. 250000/-.

\*\*[ 10. Table 10 consists of tax liability on account of outward supplies declared in the current tax period. Inward supplies attracting reverse charge shall be reported in Part C of the table.]

- "7. Invoice-level information, rate-wise, pertaining to the tax period separately for goods and services should be reported as under:
  - i. For all B to B supplies (whether inter-State or intra-State), invoice level details should be uploaded in Table 5;
  - ii. For all inter-state B to C supplies, where invoice value is more than Rs. 2,50,000/- (B to C Large) invoice level detail to be provided in Table 6; and
- iii. For all B to C supplies (whether inter-State or intra-State) where invoice value is up to Rs. 2,50,000/- State-wise summary of supplies shall be filed in Table 7."

"10. Table 10 consists of tax liability on account of outward supplies declared in the current tax period and negative ITC on account of amendment to import of goods in the current tax period.

On submission of GSTR-5, System shall compute the tax liability and ITC will be posted to the respective ledgers."

<sup>\$</sup>Substituted by Notification No.867-F.T. dated 04.11.2020 w.e.f. 15.10.2020 for the following:-

<sup>&</sup>amp;Inserted by Notification No.867-F.T. dated 04.11.2020 w.e.f. 15.10.2020.

<sup>\*\*</sup>Substituted by Notification No.867-F.T. dated 04.11.2020 w.e.f. 15.10.2020 for the following:-

#### Form GSTR-5A



[See Rule64]

(Amount in Rupees)

Cess

5

Details of supplies of online information and database access or retrieval services by a person located outside India made to non-taxable persons in India

1.

2.

3.

4.

Period:

4(b) Date of ARN:]

\*[4(a) ARN:

Place of

supply

(State/UT)

1

GSTIN of the supplier-

(b) Trade name, if any -

Rate of

tax

2

(a) Legal name of the registered person -

Month-

Name of the Authorised representative in India filing the return –

Taxable outward supplies made to consumers in India

Taxable value

3

Year-

Integrated tax

				(Amou	nt in Rupees)
Mon	Month Place of supply		Taxable value	Integrated tax	Cess
	(State/UT)				
1	2	3	4	5	6
<sup>#</sup> 6. Calcı	ulation of interest, or	any other	amount	(Amo	ount in Rupees)
Sr. No.	Description	Place supp		nount due (Intere	est/ Other)
		(State	e/UT)		

5A. Amendments to taxable outward supplies to non-taxable persons in India

Integrated tax

Cess



1	2	3	4	5
1.	Interest			
2.	Others			
	Total			

<sup>\*7.</sup> Tax, interest and any other amount payable and paid

(Amount in Rupees)

Sr. No.	Description	Amount p	ayable	Debit	Amo	ount paid
		Integrated tax	Cess	entry no.	Integrated tax	Cess
1	2	3	4	5	6	7
1.	Tax Liability (based on Table 5 & 5A)					
2.	Interest (based on Table 6)					
3.	Others (based on Table 6)					

<sup>\*</sup>Inserted by Notification No.867-F.T. dated 04.11.2020 w.e.f. 15.10.2020.

#### Verification

I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.

	Signature
Place	Name of Authorised Signatory
Date	Designation /Status

<sup>#</sup> Tables 6 &7 have been substituted by Notification No.867-F.T. dated 04.11.2020 w.e.f. 15.10.2020.



# Form GSTR-6

[See Rule 59(4) & 60(5)]

		Return for input service	e distr	ribut	or										
							Ye	ar							
							Mo	ont	h						
1.	GSTI	N													
2.	(a)	Legal name of the registered person			•			-			•		•		
	(b)	Trade name, if any													

### 3. Input tax credit received for distribution

GSTIN of supplier	Inv	oice detai	ils	Rate	Taxable value	Amount of Tax						
	No	Date	Value			Integrated tax   Central Tax   State / UT   Tax						
1	2	3	4	5	6	7	8	9	10			

(Amount in Rs. for all Tables)

# 4.Total ITC/Eligible ITC/Ineligible ITC to be distributed for tax period (From Table No. 3)

Description	Integrated	Central Tax	State / UT Tax	CESS
	tax			
1	2	3	4	5
Total ITC available for				
distribution				
Amount of eligible ITC				
Amount of ineligible ITC				

# 5. Distribution of input tax credit reported in Table 4

GSTIN of recipient/State, if recipient is unregistered	ISD	invoice	Distribution of ITC by ISD									
recipient is unregistered	No.	Date	Integrated Tax	Central Tax	Central Tax State / UT Tax							
1	2	3	4	5	6	7						
5A. Distribution of the amou	ınt of eligible	e ITC										
5B. Distribution of the amou	5B. Distribution of the amount of ineligible ITC											



# 6. Amendments in information furnished in earlier returns in Table No. ${\bf 3}$

Origin	al deta	ails						Revi	ised details				
GSTIN of supplier	No.		GSTIN of supplier		nvoice/o te/credi detail	t note	Rate	Taxable value	Amount of Tax				
				No	Date	Value			Integrated tax	Central Tax	State / UT Tax	CESS	
1	2	3	4	5	6	7	8	9	10	11	12	13	
6A. Info	rmatic	on furn	nished in	Table	3 in an	earlier p	eriod v	was inco	rrect				
6B. Debi	it Note	es/Cre	dit Notes	recei	ved [Or	riginal]	1						
6C. Debi	it Note	es/Cre	dit Notes	s [Ame	endmen	ts]							

# 7.Input tax credit mis-matches and reclaims to be distributed in the tax period

Description	Integrated	Central	State/	Cess
	tax	Tax	UT Tax	
1	2	3	4	5
7A. Input tax credit mismatch				
7B. Input tax credit reclaimed on rectification of mismatch				

#### 8. Distribution of input tax credit reported in Table No. 6 and 7 (plus / minus)

GSTIN of recipient	ISD c	redit no.	ISD	invoice	Input tax distribution by ISD				
тестріспі	No. Date No. Date		Integrated Tax	Central Tax	State Tax	CESS			
1	2	3	4	5	6	7	8	9	
8A. Distribution of the amount of eligible ITC									

									SERVINO OF THE OWNERS		
8B.	8B. Distribution of the amount of ineligible ITC										

### 9. Redistribution of ITC distributed to a wrong recipient (plus / minus)

Origi	nal inpu	tax credit	distribu	ıtion	Re-distribution of input tax credit to the correct recipient						
GSTIN of original	ISD invoice detail		ISD credit note		GSTIN of new	ISD invoice		Input tax credit redistributed			
recipient	No.	Date	No	Date	recipient	No.	Date	Integrated Tax	Central Tax	State Tax	CESS
1	2	3	4	5	6	7	8	9	10	11	12
9A. Dist	ribution	of the amo	unt of e	ligible ľ	TC						
9B. Distr	9B. Distribution of the amount of ineligible ITC										

#### 10. Late Fee

On account of	Central Tax	State / UT tax	Debit Entry No.
1	2	3	4
Late fee			

#### 11. Refund claimed from electronic cash ledger

Description	Fee	Other	Debit Entry Nos.							
1	2	3	4							
(a) Central Tax										
(b) State/UT Tax	(b) State/UT Tax									
Bank Account Details (	Bank Account Details (Drop Down)									

#### Verification

I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.

	Signature of Authorised Signatory
Place	Name of Authorised Signatory
Date	Designation /Status



#### **Instructions:-**

- 1. Terms Used:
  - a. GSTIN:-Goods and Services Tax Identification Number
  - b. ISD :-Input Service Distributor
  - c. ITC: Input tax Credit.
- 2. GSTR-6 can only be filed only after 10th of the month and before 13th of the month succeeding the tax period.
- 3. ISD details will flow to Part B of GSTR-2A of the Registered Recipients Units on filing of GSTR-6.
- 4. ISD will not have any reverse charge supplies. If ISD wants to take reverse charge supplies, then in that case ISD has to separately register as Normal taxpayer.
- 5. ISD will have late fee and any other liability only.
- 6. ISD has to distribute both eligible and ineligible ITC to its Units in the same tax period in which the inward supplies have been received.
- 7. Ineligible ITC will be in respect of supplies made as per Section 17(5).
- 8. Mismatch liability between GSTR-1 and GSTR-6 will be added to ISD and further ISD taxpayer has to issue ISD credit note to reduce the ITC distributed earlier to its registered recipients units.
- 9. Table 7 in respect of mismatch liability will be populated by the system.
- 10. Refund claimed from cash ledger through Table 11 will result in a debit entry in electronic cash ledger.



#### Form GSTR-6A

[See Rule 59(3) & 65]

# Details of supplies auto-drafted from

(Auto-drafted from GSTR-1)

Year		
Month		

1.	GSTIN	
2.	(a) Legal name of the registered person	
	(b) Trade name, if any	

# 3.Input tax credit received for distribution

GSTIN of supplier		oice det	tails	Rate	Taxable value	Amount of Tax					
	No	Date	Value			Integrated tax	Central Tax	State / UT Tax	Cess		
1	2	3	4	5	6	7	8	9	10		

(Amount in Rs. for all Tables)

# 4.Debit / Credit notes (including amendments thereof) received during current tax period

Details of o	locument	Revised details of document or details of Debit / Credit Note										
GSTIN of supplier	No.	Date	GSTIN of	No.	Date	Value	Rate	Taxable value		Amount of tax		
supplier			supplier					varue	Integrated tax	Central	State /	Cess
									tax	Tax	UT Tax	
1	2	3	4	5	6	7	8	9	10	11	12	13



#### Form GSTR-7

[See Rule 66(1)]

#### **Return for Tax Deducted at Source**

Year		
Month		

1.	GSTIN															
2.	(a) Legal name of the Deductor	Auto Populated														
	(b) Trade name, if any	Auto Populated														

#### 3. Details of the tax deducted at source

(Amount in Rs. for all Tables)

GSTIN of deductee	Amount paid to deductee on which tax is deducted	Amount	of tax deducted	at source
or deddetee	tar is deducted	Integrated Tax	Central Tax	State/UT Tax
1	2	3	4	5

#### 4. Amendments to details of tax deducted at source in respect of any earlier tax period

	Original o	details		Revised details							
Month	GSTIN of deductee	Amount paid to deductee on	GSTIN of	Amount paid to deductee on which	Amount of	f tax deducte	d at source				
	deddetee	which tax is deducted	deductee	taxis deducted	Integrated Tax	Central Tax	State/UT Tax				
1	2	3	4 5		6	7	8				

# 5. Tax deduction at source and paid

Description	Amount of tax deducted	Amount paid
1	2	3
Integrated Tax		
Central Tax		
State/UT Tax		

# 6. Interest, late Fee payable and paid

Description	Amount payable	Amount paid					
1	2	3					
(I) Interest on account of TDS in respect of							
(a) Integrated tax							



(b) Central Tax							
(c) State/UT Tax							
(II) Late fee							
(a) Central tax							
(b) State / UT tax							

#### 7. Refund claimed from electronic cash ledger

Description	Tax	Interest	Penalty	Fee	Other	Debit Entry
						Nos.
1	2	3	4	5	6	7
Integrated Tax						
Central Tax						
State/UT Tax						
Bank Account Deta	ails (Drop 1	Down)				

# 8. Debit entries in electronic cash ledger for TDS/interest payment [to be populated after payment of tax and submissions of return]

Description	Tax paid in cash	Interest	Late fee
1	2	3	4
Integrated Tax			
(b) Central Tax			
(c) State/UT Tax			

#### Verification

I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.

Place:	Name of Authorised Signatory
Date:	Designation /Status
Instructions –	

- 1. Terms used:
  - a) GSTIN: Goods and Services Tax Identification Number
  - b) TDS: Tax Deducted at Source
- 2. Table 3 to capture details of tax deducted.
- 3. Table 4 will contain amendment of information provided in earlier tax periods.
- 4. Return cannot be filed without full payment of liability.



#### Form GSTR 7A

[See Rule 66(3)]

#### **Tax Deduction at Source Certificate**

- 1. TDS Certificate No. –
- 2. GSTIN of deductor –
- 3. Name of deductor –
- 4. GSTIN of deductee-
- 5. (a) Legal name of the deductee -
  - (b) Trade name, if any –
- 6. Tax period in which tax deducted and accounted for in GSTR-7 –
- 7. Details of supplies Amount of tax deducted –

Value on which tax deducted	Amount of Tax deducted at source (Rs.)								
tax deducted	Integrated Tax	Central	State /UT						
		Tax	Tax						
1	2	3	4						

Signature

Name

Designation

Office -



# Form GSTR - 8

[See Rule 67(1)]

#### Statement for tax collection at source

Year		
Month		

1			GSTIN											
2	2. (	(a)	Legal name of the registered person	Auto Populated										
	(	(b)	Trade name, if any	1	Auto	o Po	opu	late	d					

# 3. Details of supplies made through e-commerce operator

(Amount in Rs. for all Tables)

GSTIN of the	Details of s	upplies made wh	ich attract TCS	Amount of tax collected at source					
supplier	Gross value of supplies made	Value of supplies returned	Net amount liable for TCS	Integrated Tax	Central Tax	State /UT Tax			
1	2	3 4		5	6	7			
3A. Supplies made to registered persons									
3B. Supplies made to unregistered persons									

# 4. Amendments to details of supplies in respect of any earlier statement

Original details		Revised details								
Month	GSTIN of	GSTIN of	Details of sup	hich attract	Amount of tax collected at source					
	supplier	supplier	Gross value	Value of	Net	Integrated	Central	State/UT Tax		
			of supplies	supply	amount	Tax	Tax			
			made	returned	liable for					
					TCS					
1	2	3	4	5	6	7	8	9		
4A. Supplies made to registered persons										
4B. Supplies made to unregistered persons										

#### 5. Details of interest

On account of	Amount	Amount of interest				
	in default	Integrated Tax	State /UT Tax			
1	2	3	4	5		

T.J.	mount				
Гах payable and paid	d				
Description	Ta	x payable		Amount paid	
1		2		3	
Integrated Tax					
Central Tax					
State / UT Tax					
nterest payable and  Description	paid	Amoun	t of	Amount paid	
Description		interest pa		7 mount para	•
1		2	-,	3	
Integrated tax					
Central Tax					
Contrar Tax					
State/UT Tax  Refund claimed from					
	Tax	Interest	Penalty	Other	Debit En Nos.
State/UT Tax  Refund claimed from  Description				Other 5	
State/UT Tax  Refund claimed from  Description  1  Integrated tax	Tax	Interest	Penalty		Nos.
State/UT Tax  Refund claimed from  Description	Tax	Interest	Penalty		Nos.
State/UT Tax  Refund claimed from  Description  1 Integrated tax Central Tax State/UT Tax	Tax 2	Interest 3	Penalty		Nos.
Refund claimed from  Description  1  Integrated tax Central Tax State/UT Tax  Bank Account Details  Debit entries in cash layment of tax and subserved.	Tax 2 (Drop	Interest  3  Down)  for TCS/in ns of return	Penalty  4  aterest payin]	nent [to be pop	Nos. 6 oulated aft
State/UT Tax  Refund claimed from  Description  1  Integrated tax Central Tax State/UT Tax  Bank Account Details  Debit entries in cash 1	Tax 2 (Drop	Interest  3  Down)  for TCS/inns of return  Tax paid in	Penalty  4  aterest payin]	nent [to be pop	Nos. 6 oulated aft
Refund claimed from  Description  1 Integrated tax Central Tax State/UT Tax Bank Account Details  Debit entries in cash I ment of tax and subsection  Description 1	Tax 2 (Drop	Interest  3  Down)  for TCS/in ns of return	Penalty  4  aterest payin]	nent [to be pop	Nos. 6 oulated aft
Refund claimed from  Description  1 Integrated tax Central Tax State/UT Tax Bank Account Details  Debit entries in cash I ment of tax and subsection  Description 1 Integrated tax	Tax 2 (Drop	Interest  3  Down)  for TCS/inns of return  Tax paid in	Penalty  4  aterest payin]	nent [to be pop	Nos. 6 oulated aft
Refund claimed from  Description  1 Integrated tax Central Tax State/UT Tax Bank Account Details  Debit entries in cash lament of tax and substants	Tax 2 (Drop	Interest  3  Down)  for TCS/inns of return  Tax paid in	Penalty  4  aterest payin]	nent [to be pop	Nos. 6 oulated aft

Signature of Authorised Signatory

Name of Authorised Signatory .....

Date: Designation /Status.....

Place:



#### **Instructions:-**

1. Terms Used:-

a. GSTIN:- Goods and Services Tax Identification Number

b. TCS:- Tax Collected at source

- 2. An e-commerce operator can file GSTR- 8 only when full TCS liability has been discharged.
- 3. TCS liability will be calculated on the basis of table 3 and table 4.
- 4. Refund from electronic cash ledger can only be claimed only when all the TCS liability for that tax period has been discharged.
- 5. Cash ledger will be debited for the refund claimed from the said ledger.
- 6. Amount of tax collected at source will flow to Part C of GSTR- 2A of the taxpayer on filing of GSTR-8.
- 7. Matching of Details with supplier's GSTR-1 will be at the level of GSTIN of supplier.



# #FORM GSTR - 9

[See rule 80]

#### **Annual Return**

Pt. I	Basic Details								
1	Financial Year								
2	GSTIN								
3A	Legal Name								
3B	Trade Name (if any)								
Pt. II	Details of Outwa	ard and inward suppl	ies made dı	uring the f	inancial year				
		(Amount in ₹ in all tables)							
	Nature of Supplies	Taxable Value	Central Tax	State Tax / UT Tax	Integrated Tax	Cess			
	1	2	3	4	5	6			
4	Details of advances, inward and outwo	ard supplies made du	ring the fin	ancial year	r on which tax is	payable			
A	Supplies made to un-registered persons (B2C)								
В	Supplies made to registered persons (B2B)								
С	Zero rated supply (Export) on payment of tax (except supplies to SEZs)								
D	Supply to SEZs on payment of tax								
Е	Deemed Exports								
F	Advances on which tax has been paid but invoice has not been issued (not covered under (A) to (E) above)								
G	Inward supplies on which tax is to be paid on reverse charge basis								
Н	Sub-total (A to G above)								
I	Credit Notes issued in respect of transactions specified in (B) to (E) above (-)	9							
J	Debit Notes issued in respect of transactions specified in (B) to (E) above (+)	2							

K	Supplies / tax declared through Amendments (+)					VINO ST. AND ACTITION
L	Supplies / tax reduced through Amendments (-)					
M	Sub-total (I to L above)					
N	Supplies and advances on which tax is to be paid (H + M) above			•		
5	Details of Outward supplies made durin	g the financial year	on which	tax is not p	ayable	
A	Zero rated supply (Export) without payment of tax					
В	Supply to SEZs without payment of tax					
С	Supplies on which tax is to be paid by the recipient on reverse charge basis					
D	Exempted					
Е	Nil Rated					
F	Non-GST supply (includes 'no supply')					
G	Sub-total (A to F above)					
Н	Credit Notes issued in respect of transactions specified in A to F above (-)					
I	Debit Notes issued in respect of transactions specified in A to F above (+)					
J	Supplies declared through Amendments (+)					
K	Supplies reduced through Amendments (-)					
L	Sub-Total (H to K above)					
M	Turnover on which tax is not to be paid (G + L above)					
N	Total Turnover (including advances) (4N + 5M - 4G above)					
Pt. III	]	Details of ITC for th	ne financia	l year		
	Description	Туре	Central Tax	State Tax / UT Tax	Integrated Tax	Cess
	1	2	3	4	5	6
6	Details	s of ITC availed du	ing the fin	ancial yea	r	
A	Total amount of input tax credit availed	through FORM	<auto></auto>	<auto></auto>	<auto></auto>	<auto></auto>

	GSTR-3B (sum total of Table 4A of FC	ORM GSTR-3B)			NINO OST
	Inward supplies (other than imports and	Inputs			*ACTITION
В	inward supplies liable to reverse charge but includes services received from	Capital Goods			
	SEZs)	Input Services			
	Inward supplies received from	Inputs			
C	unregistered persons liable to reverse charge (other than B above) on which	Capital Goods			
	tax is paid & ITC availed	Input Services			
	Inward supplies received from registered persons liable to reverse charge (other	Inputs			
D	than B above) on which tax is paid and	Capital Goods			
	ITC availed	Input Services			
Е	Import of goods (including supplies from SEZs)	Inputs			
	SEEs)	Capital Goods			
F	Import of services (excluding inward supp	lies from SEZs)			
G	Input Tax credit received from ISD				
Н	Amount of ITC reclaimed (other than B ab				
	provisions of the Act				
I	Sub-total (B to H above)				
J	Difference (I - A above)				
K	Transition Credit through TRAN-I (including revisions if any)				
L	Transition Credit through TRAN-II				
M	Any other ITC availed but not specified ab	ove			
N	Sub-total (K to M above)				
О	Total ITC availed (I + N above)				
7	Details of ITC Reversed and Ineligible I	TC for the financi	ial year		
A	As per Rule 37				
В	As per Rule 39				
С	As per Rule 42				
D	As per Rule 43				
Е	As per section 17(5)				
F	Reversal of TRAN-I credit				
G	Reversal of TRAN-II credit				
Н	Other reversals (pl. specify)				
I	Total ITC Reversed (Sum of A to H above	)			

J	Net ITC Available for Util	lization (60 - 7I)	)				RVING OST ART
8			Other ITC related	l informati	ion		Стпо
A	ITC as per GSTR-2A (Tab	ole 3 & 5 thereof	)	<auto></auto>	<auto></auto>	<auto></auto>	<auto></auto>
В	ITC as per sum total of 6(1	B) and 6(H) above	ve	<auto></auto>			
С	<sup>1</sup> [ITC on inward supplies supplies liable to rever received from SEZs) receavailed in the next financial	includes services financial year but					
D	Difference [A-(B+C)]						
Е	ITC available but not avail	led					
F	ITC available but ineligible	e					
G	IGST paid on import of go	oods (including s	supplies from SEZ)				
Н	IGST credit availed on im	port of goods (as	s per 6(E) above)	<auto></auto>			
I	Difference (G-H)						
J	ITC available but not avail						
K	Total ITC to be lapsed in $G$ (E + F + J)	<auto></auto>	<auto></auto>	<auto></auto>	<auto></auto>		
Pt. IV	De	tails of tax paid	as declared in retu	rns filed du	ring the f	inancial year	
	Description	Tax Payable	Paid through cash		I	Paid through ITC	
9				Central Tax	State Tax / UT Tax	Integrated Tax	Cess
	1	2	3	4	5	6	7
	Integrated Tax						
	Central Tax						
	State/UT Tax						
	Cess						
	Interest						
	Late fee						
!	Penalty						
	Other						
Pt. V	<sup>1</sup> [Particulars of the t	ransactions for	the financial year d specified p		returns of	the next financia	al year till the
	Description		Taxable Value	Central Tax	State Tax /	Integrated Tax	Cess

						UT Tax		VING OST &
		1		2	3	4	5	6
10	Supplies / tax							
	Amendments							
11	Supplies / tax Amendments							
12	Reversal of IT financial year	C availed du	iring previous					
13	ITC availed for year	or the previou	us financial					
14			Differential ta	x paid on account of	f declaration	on in 10 &	11 above	
		Γ	Description		Pay	able		Paid
			1			2		3
	Integrated Tax	ζ						
	Central Tax							
	State/UT Tax							
	Cess							
	Interest							
Pt. VI				Other Info	mation			
15			F	Particulars of Dema	nds and Ro	efunds		
	Details	Central Tax	State Tax / UT Tax	Integrated Tax	Cess	Interest	Penalty	Late Fee / Others
	1	2	3	4	5			
A	Total Refund claimed							
В	Total Refund sanctioned							
С	Total Refund Rejected							
D	Total Refund Pending							
Е	Total demand of taxes							

F	Total taxes paid in respect of E above							SERVINO ON THE THE PARTY OF THE
G	Total demands pending out of E above							
16	Information	on supplies	received from (	composition taxpay approval		d supply u	nder section 143	and goods sent on
		Details		Taxable Value	Central Tax	State Tax / UT Tax	Integrated Tax	Cess
		1		2	3	4	5	6
A	Supplies recei taxpayers	ved from Co	mposition					
В	Deemed suppl	ly under Sec	tion 143					
С	Goods sent on returned	approval ba	sis but not					
17			HS	N Wise Summary o	of outward	supplies		
HSN Code	UQC	Total Quantity	Taxable Value	Rate of Tax	Central Tax	State Tax / UT Tax	Integrated Tax	Cess
1	2	3	4	5	6	7	8	9
18			HS	SN Wise Summary	of Inward s	supplies		
HSN Code	UQC	Total Quantity	Taxable Value	Rate of Tax	Central Tax	State Tax / UT Tax	Integrated Tax	Cess
1	2	3	4	5	6	7	8	9
19				Late fee payab	le and paid	i		
		D	Description			able	I	Paid
A	Central Tax		1		2	2		3
A B	State Tax							

## Verification:

I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed there from and in case of any reduction in output tax liability the benefit thereof has been/will be passed on to the recipient of supply.



#### Name of Authorised Signatory

Date Designation / Status

#### **Instructions:** –

Place

1. Terms used:

a. GSTIN:Goods and Services Tax Identification Number

b. UQC: Unit Quantity Code

c. HSN: Harmonized System of Nomenclature Code

2. <sup>9</sup>[It is mandatory to file all **FORM GSTR-1** and **FORM GSTR-3B** for the financial year for which the return is being filed for before filing this return and for FY 2017-18, the details for the period between July 2017 to March 2018 are to be provided in this return.]

<sup>1</sup>[2A. In the Table, against serial numbers 4, 5, 6 and 7, the taxpayers shall report the values pertaining to the financial year only. The value pertaining to the preceding financial year shall not be reported here.]

- 3.  $^{3}[Omitted]$
- 4. Part II consists of the details of all outward supplies & advances received during the financial year for which the annual return is filed. It may be noted that all the supplies for which payment has been made through **FORM GSTR-3B** between July 2017 to March 2018 shall be declared in this part. <sup>8</sup>[For FY 2017-18,] <sup>4</sup>[it may be noted that additional liability for the FY 2017-18 <sup>8</sup>[or FY 2018-19] <sup>12</sup>[or FY 2019-20] <sup>15</sup>[or FY 2020-21] not declared in **FORM GSTR-1** and **FORM GSTR-3B** may be declared in this return. However, taxpayers cannot claim input tax credit <sup>10</sup>[omitted] through this return.] The instructions to fill Part II are as follows:

Table No.	Instructions
4A	Aggregate value of supplies made to consumers and unregistered persons on which tax has been paid shall be declared here. These will include details of supplies made through E-Commerce operators and are to be declared as net of credit notes or debit notes issued in this regard. Table 5, Table 7 along with respective amendments in Table 9 and Table 10 of FORM GSTR-1 may be used for filling up these details.
4B	Aggregate value of supplies made to registered persons (including supplies made to UINs) on which tax has been paid shall be declared here. These will include supplies made through E-Commerce operators but shall not include supplies on which tax is to be paid by the recipient on reverse charge basis. Details of debit and credit notes are to be mentioned separately. Table 4A and Table 4C of FORM GSTR-1 may be used for filling up these details.
4C	Aggregate value of exports (except supplies to SEZs) on which tax has been paid shall be declared here. Table 6A of FORM GSTR-1 may be used for filling up these details.
4D	Aggregate value of supplies to SEZs on which tax has been paid shall be declared here. Table 6B of GSTR-1 may be used for filling up these details.



4E	Aggregate value of supplies in the nature of deemed exports on which tax has been paid shall be declared here. Table 6C of FORM GSTR-1 may be used for filling up these details.
4F	Details of all unadjusted advances i.e. advance has been received and tax has been paid but invoice has not been issued in the current year shall be declared here. Table 11A of FORM GSTR-1 may be used for filling up these details.
4G	Aggregate value of all inward supplies (including advances and net of credit and debit notes) on which tax is to be paid by the recipient (i.e.by the person filing the annual return) on reverse charge basis. This shall include supplies received from registered persons, unregistered persons on which tax is levied on reverse charge basis. This shall also include aggregate value of all import of services. Table 3.1(d) of FORM GSTR-3B may be used for filling up these details.
4I	Aggregate value of credit notes issued in respect of B to B supplies (4B), exports (4C), supplies to SEZs (4D) and deemed exports (4E) shall be declared here. Table 9B of FORM GSTR-1 may be used for filling up these details.
	<sup>8</sup> [For FY 2017-18, 2018-19 <sup>16</sup> [, 2019-20 and 2020-21], the registered person shall have an option to fill Table 4B to Table 4E net of credit notes in case there is any difficulty in reporting such details separately in this table.]
4J	Aggregate value of debit notes issued in respect of B to B supplies (4B), exports (4C), supplies to SEZs (4D) and deemed exports (4E) shall be declared here. Table 9B of FORM GSTR-1 may be used for filling up these details.
	<sup>8</sup> [For FY 2017-18, 2018-19 <sup>16</sup> [, 2019-20 and 2020-21], the registered person shall have an option to fill Table 4B to Table 4E net of debit notes in case there is any difficulty in reporting such details separately in this table.]
4K & 4L	Details of amendments made to B to B supplies (4B), exports (4C), supplies to SEZs (4D) and deemed exports (4E), credit notes (4I), debit notes (4J) and refund vouchers shall be declared here. Table 9A and Table 9C of FORM GSTR-1 may be used for filling up these details.
	<sup>8</sup> [For FY 2017-18, 2018-19 <sup>16</sup> [, 2019-20 and 2020-21], the registered person shall have an option to fill Table 4B to Table 4E net of amendments in case there is any difficulty in reporting such details separately in this table.]
5A	Aggregate value of exports (except supplies to SEZs) on which tax has not been paid shall be declared here. Table 6A of FORM GSTR-1 may be used for filling up these details.
5B	Aggregate value of supplies to SEZs on which tax has not been paid shall be declared here. Table 6B of GSTR-1 may be used for filling up these details.
5C	Aggregate value of supplies made to registered persons on which tax is payable by the recipient on reverse charge basis. Details of debit and credit notes are to be mentioned separately. Table 4B of FORM GSTR-1 may be used for filling up these details.
5D, 5E	Aggregate value of exempted, Nil Rated and Non-GST supplies shall be declared



and 5F	here. Table 8 of FORM GSTR-1 may be used for filling up these details.
	The value of "no supply" shall be declared under Non-GST supply (5F).
	<sup>8</sup> [For FY 2017-18, 2018-19 <sup>16</sup> [, 2019-20 and 2020-21], the registered person shall have an option to either separately report his supplies as exempted, nil rated and Non-GST supply or report consolidated information for all these three heads in the "exempted" row only.]
5H	Aggregate value of credit notes issued in respect of supplies declared in 5A, 5B, 5C, 5D, 5E and 5F shall be declared here. Table 9B of FORM GSTR-1 may be used for filling up these details.
	<sup>8</sup> [For FY 2017-18, 2018-19 <sup>16</sup> [, 2019-20 and 2020-21], the registered person shall have an option to fill Table 5A to Table 5F net of credit notes in case there is any difficulty in reporting such details separately in this Table.]
51	Aggregate value of debit notes issued in respect of supplies declared in 5A, 5B, 5C, 5D, 5E and 5F shall be declared here. Table 9B of FORM GSTR-1 may be used for filling up these details.
	<sup>8</sup> [For FY 2017-18, 2018-19 <sup>16</sup> [, 2019-20 and 2020-21], the registered person shall have an option to fill Table 5A to Table 5F net of debit notes in case there is any difficulty in reporting such details separately in this Table.]
5J & 5K	Details of amendments made to exports (except supplies to SEZs) and supplies to SEZs on which tax has not been paid shall be declared here. Table 9A and Table 9C of FORM GSTR-1 may be used for filling up these details.
	<sup>8</sup> [For FY 2017-18, 2018-19 <sup>16</sup> [, 2019-20 and 2020-21], the registered person shall have an option to fill Table 5A to Table 5F net of amendments in case there is any difficulty in reporting such details separately in this Table.]
5N	Total turnover including the sum of all the supplies (with additional supplies and amendments) on which tax is payable and tax is not payable shall be declared here. This shall also include amount of advances on which tax is paid but invoices have not been issued in the current year. However, this shall not include the aggregate value of inward supplies on which tax is paid by the recipient (i.e. by the person filing the annual return) on reverse charge basis.

5. Part III consists of the details of all input tax credit availed and reversed in the financial year for which the annual return is filed. The instructions to fill Part III are as follows:

Table No.	Instructions
6A	Total input tax credit availed in Table 4A of FORM GSTR-3B for the taxpayer would be auto-populated here.
6B	Aggregate value of input tax credit availed on all inward supplies except those on which tax is payable on reverse charge basis but includes supply of services received



from SEZs shall be declared here. It may be noted that the total ITC availed is to be classified as ITC on inputs, capital goods and input services. Table 4(A)(5) of FORM GSTR-3B may be used for filling up these details.

This shall not include ITC which was availed, reversed and then reclaimed in the ITC ledger. This is to be declared separately under 6(H) below.

<sup>8</sup>[For FY 2017-18 and 2018-19, the registered person shall have an option to either report the breakup of input tax credit as inputs, capital goods and input services or report the entire input tax credit under the "inputs" row only.]

<sup>12</sup>[For FY 2019-20 <sup>15</sup>[and 2020-21], the registered person shall report the breakup of input tax credit as capital goods and have an option to either report the breakup of the remaining amount as inputs and input services or report the entire remaining amount under the "inputs" row only.]

Aggregate value of input tax credit availed on all inward supplies received from unregistered persons (other than import of services) on which tax is payable on reverse charge basis shall be declared here. It may be noted that the total ITC availed is to be classified as ITC on inputs, capital goods and input services. Table 4(A)(3) of FORM GSTR-3B may be used for filling up these details.

<sup>8</sup>[For FY 2017-18 and 2018-19, the registered person shall have an option to either report the breakup of input tax credit as inputs, capital goods and input services or report the entire input tax credit under the "inputs" row only.

<sup>12</sup>[For FY 2019-20 <sup>15</sup>[and 2020-21], the registered person shall report the breakup of input tax credit as capital goods and have an option to either report the breakup of the remaining amount as inputs and input services or report the entire remaining amount under the "inputs" row only.]

For <sup>13</sup>[FY 2017-18, 2018-19 <sup>16</sup>[, 2019-20 and 2020-21]] the registered person shall have an option to either report Table 6C and Table 6D separately or report the consolidated details of Table 6C and 6D in Table 6D only.]

Aggregate value of input tax credit availed on all inward supplies received from registered persons on which tax is payable on reverse charge basis shall be declared here. It may be noted that the total ITC availed is to be classified as ITC on inputs, capital goods and input services. Table 4(A)(3) of FORM GSTR-3B may be used for filling up these details.

6D

<sup>8</sup>[For FY 2017-18 and 2018-19, the registered person shall have an option to either report the breakup of input tax credit as inputs, capital goods and input services or report the entire input tax credit under the "inputs" row only.

<sup>12</sup>[For FY 2019-20 <sup>15</sup>[and 2020-21], the registered person shall report the breakup of input tax credit as capital goods and have an option to either report the breakup of the remaining amount as inputs and input services or report the entire remaining amount under the "inputs" row only.]

For <sup>13</sup>[FY 2017-18, 2018-19 <sup>16</sup>[, 2019-20 and 2020-21]], the registered person shall have an option to either report Table 6C and Table 6D separately or report the



	consolidated details of Table 6C and 6D in Table 6D only.]
6E	Details of input tax credit availed on import of goods including supply of goods received from SEZs shall be declared here. It may be noted that the total ITC availed is to be classified as ITC on inputs and capital goods. Table 4(A)(1) of FORM GSTR-3B may be used for filling up these details.
	<sup>8</sup> [For FY 2017-18 and 2018-19, the registered person shall have an option to either report the breakup of input tax credit as inputs and capital goods or report the entire input tax credit under the "inputs" row only.]
	<sup>12</sup> [For <sup>17</sup> [FY 2019-20 and 2020-21], the registered person shall report the breakup of input tax credit as capital goods and have an option to either report the breakup of the remaining amount as inputs and input services or report the entire remaining amount under the "inputs" row only.]
6F	Details of input tax credit availed on import of services (excluding inward supplies from SEZs) shall be declared here. Table 4(A)(2) of FORM GSTR-3B may be used for filling up these details.
6G	Aggregate value of input tax credit received from input service distributor shall be declared here. Table 4(A)(4) of FORM GSTR-3B may be used for filling up these details.
6H	Aggregate value of input tax credit availed, reversed and reclaimed under the provisions of the Act shall be declared here.
6J	The difference between the total amount of input tax credit availed through FORM GSTR-3B and input tax credit declared in row B to H shall be declared here. Ideally, this amount should be zero.
6K	Details of transition credit received in the electronic credit ledger on filing of FORM GST TRAN-I including revision of TRAN-I (whether upwards or downwards), if any shall be declared here.
6L	Details of transition credit received in the electronic credit ledger after filing of FORM GST TRAN-II shall be declared here.
6M	Details of ITC availed but not covered in any of heads specified under 6B to 6L above shall be declared here. Details of ITC availed through <b>FORM ITC-01</b> and <b>FORM ITC-02</b> in the financial year shall be declared here.
7A, 7B, 7C, 7D, 7E, 7F, 7G and 7H	Details of input tax credit reversed due to ineligibility or reversals required under rule 37, 39, 42 and 43 of the CGST Rules, 2017 shall be declared here. This column should also contain details of any input tax credit reversed under section 17(5) of the CGST Act, 2017 and details of ineligible transition credit claimed under FORM GST TRAN-I or FORM GST TRAN-II and then subsequently reversed. Table 4(B) of FORM GSTR-3B may be used for filling up these details. Any ITC reversed through FORM ITC -03 shall be declared in 7H. If the amount stated in Table 4D of FORM GSTR-3B was not included in table 4A of FORM GSTR-3B, then no entry should be made in table 7E of FORM GSTR-9. However, if amount mentioned in table 4D of

	FORM GSTR-3B was included in table 4A of FORM GSTR-3B, then entry will come in 7E of FORM GSTR-9.
	<sup>8</sup> [For <sup>13</sup> [FY 2017-18, <sup>18</sup> [2018-19, 2019-20 and 2020-21]], the registered person shall have an option to either fill his information on reversals separately in Table 7A to 7E or report the entire amount of reversal under Table 7H only. However, reversals on account of TRAN-1 credit (Table 7F) and TRAN-2 (Table 7G) are to be mandatorily reported.]
8A	The total credit available for inwards supplies (other than imports and inwards supplies liable to reverse charge but includes services received from SEZs) pertaining to <sup>11</sup> [the financial year for which the return is being for] and reflected in <b>FORM GSTR-2A</b> (table 3 & 5 only) shall be auto-populated in this table. This would be the aggregate of all the input tax credit that has been declared by the corresponding suppliers in their <b>FORM GSTR-1</b> . <sup>8</sup> [For FY 2017-18,] <sup>4</sup> [It may be noted that the <b>FORM GSTR-2A</b> generated as on the 1st May, 2019 shall be auto-populated in this table.]
	<sup>8</sup> [For FY 2018-19, It may be noted that the FORM GSTR-2A generated as on the 1st November, 2019 shall be auto-populated in this table. For FY 2017-18 and 2018-19, the registered person shall have an option to upload the details for the entries in Table 8A to 8D duly signed, in PDF format in FORM GSTR-9C (without the CA certification).]
	<sup>12</sup> [For FY 2019-20, it may be noted that the details from FORM GSTR-2A generated as on the 1st November, 2020 shall be auto-populated in this table.]
8B	The input tax credit as declared in Table 6B and 6H shall be auto-populated here.  *8[For FY 2017-18 and 2018-19, the registered person shall have an option to upload the details for the entries in Table 8A to 8D duly signed, in PDF format in FORM GSTR-9C (without the CA certification).]
8C	<sup>14</sup> [Aggregate value of input tax credit availed on all inward supplies (except those on which tax is payable on reverse charge basis but includes supply of services received from SEZs) received during the financial year for which the annual return is being filed for but credit on which was availed in the next financial year within the period specified under Section 16(4) of the WBGST Act, 2017.]
8D	Aggregate value of the input tax credit which was available in <b>FORM GSTR-2A</b> (table 3 & 5 only) but not availed in <b>FORM GSTR-3B</b> returns shall be computed based on values of 8A, 8B and 8C.
	However, there may be circumstances where the credit availed in <b>FORM GSTR-3B</b> was greater than the credit available in <b>FORM GSTR-2A</b> . In such cases, the value in row 8D shall be negative.
	<sup>8</sup> [For FY 2017-18 and 2018-19, the registered person shall have an option to upload the details for the entries in Table 8A to Table 8D duly signed, in PDF format in FORM GSTR-9C (without the CA certification).]
8E & 8F	The credit which was available and not availed in <b>FORM GSTR-3B</b> and the credit was not availed in <b>FORM GSTR-3B</b> as the same was ineligible shall be declared





	here. Ideally, if 8D is positive, the sum of 8E and 8F shall be equal to 8D.
8G	Aggregate value of IGST paid at the time of imports (including imports from SEZs) during the financial year shall be declared here.
8H	The input tax credit as declared in Table 6E shall be auto-populated here.
8K	The total input tax credit which shall lapse for the current financial year shall be computed in this row.

- 6. Part IV is the actual tax paid during the financial year. Payment of tax under Table 6.1 of **FORM GSTR-3B** may be used for filling up these details.
- 7. <sup>8</sup>[For FY 2017-18,] Part V consists of particulars of transactions for the previous financial year but paid in the **FORM GSTR-3B** <sup>5</sup>[between April 2018 to March 2019]. <sup>8</sup>[For FY 2018-19, Part V consists of particulars of transactions for the previous financial year but paid in the FORM GSTR-3B between April 2019 to September 2019.] <sup>12</sup>[For FY 2019-20, Part V consists of particulars of transactions for the previous financial year but paid in the FORM GSTR-3B between April 2020 to September 2020.]

### The instructions to fill Part V are as follows:

Table No.	Instructions
10 & 11	<sup>8</sup> [For FY 2017-18,] details of additions or amendments to any of the supplies already declared in the returns of the previous financial year but such amendments were furnished in Table 9A, Table 9B and Table 9C of FORM GSTR-1 of April <sup>6</sup> [2018 to March 2019] shall be declared here.
	<sup>8</sup> [For FY 2018-19, Details of additions or amendments to any of the supplies already declared in the returns of the previous financial year but such amendments were furnished in Table 9A, Table 9B and Table 9C of FORM GSTR-1 of April 2019 to September 2019 shall be declared here.]
	<sup>12</sup> [For FY 2019-20, Details of additions or amendments to any of the supplies already declared in the returns of the previous financial year but such amendments were furnished in Table 9A, Table 9B and Table 9C of FORM GSTR-1 of April 2020 to September 2020 shall be declared here.]
	<sup>15</sup> [For FY 2020-21, details of additions or amendments to any of the supplies already declared in the returns of the previous financial year but such amendments were furnished in Table 9A, Table 9B and Table 9C of FORM GSTR-1 of April 2021 to September 2021 shall be declared here.]
12	<sup>8</sup> [For FY 2017-18,] Aggregate value of reversal of ITC which was availed in the previous financial year but reversed in returns filed for the months of April <sup>6</sup> [2018 to March 2019] shall be declared here. Table 4(B) of FORM GSTR-3B may be used for filling up these details.
	<sup>8</sup> [For FY 2018-19, Aggregate value of reversal of ITC which was availed in the previous financial year but reversed in returns filed for the months of April 2019 to

<sup>&</sup>lt;sup>15</sup>[For FY 2020-21, Part V consists of particulars of transactions for the previous financial year but paid in the FORM GSTR-3B between April 2021 to September 2021.]



September 2019 shall be declared here. Table 4(B) of FORM GSTR-3B may be used for filling up these details.

<sup>12</sup>[For FY 2019-20, Aggregate value of reversal of ITC which was availed in the previous financial year but reversed in returns filed for the months of April 2020 to September 2020 shall be declared here. Table 4(B) of FORM GSTR-3B may be used for filling up these details. For FY 2019-20, the registered person shall have an option to not fill this table.]

<sup>15</sup>[For FY 2020-21, aggregate value of reversal of ITC which was availed in the previous financial year but reversed in returns filed for the months of April 2021 to September 2021 shall be declared here. Table 4(B) of FORM GSTR-3B may be used for filling up these details.]

For  $^{13}$ [FY 2017-18,  $^{18}$ [2018-19 , 2019-20 and 2020-21]], the registered person shall have an option to not fill this table.]

13

<sup>8</sup>[For FY 2017-18,] Details of ITC for goods or services received in the previous financial year but ITC for the same was availed in returns filed for the months of April <sup>7</sup>[2018 to March 2019] shall be declared here. Table 4(A) of FORM GSTR-3B may be used for filling up these details. However, any ITC which was reversed in the FY 2017-18 as per second proviso to sub-section (2) of section 16 but was reclaimed in FY 2018-19, the details of such ITC reclaimed shall be furnished in the annual return for FY 2018-19.

<sup>8</sup>[For FY 2018-19, Details of ITC for goods or services received in the previous financial year but ITC for the same was availed in returns filed for the months of April 2019 to September 2019 shall be declared here. Table 4(A) of FORM GSTR-3B may be used for filling up these details. However, any ITC which was reversed in the FY 2018-19 as per second proviso to sub-section (2) of section 16 but was reclaimed in FY 2019-20, the details of such ITC reclaimed shall be furnished in the annual return for FY 2019-20. For <sup>13</sup>[FY 2017-18, <sup>18</sup>[2018-19, 2019-20 and 2020-21]], the registered person shall have an option to not fill this table.]

<sup>12</sup>[For FY 2019-20, Details of ITC for goods or services received in the previous financial year but ITC for the same was availed in returns filed for the months of April 2020 to September 2020 shall be declared here. Table 4(A) of FORM GSTR-3B may be used for filling up these details. However, any ITC which was reversed in the FY 2019-20 as per second proviso to sub-section (2) of section 16 but was reclaimed in FY 2020-21, the details of such ITC reclaimed shall be furnished in the annual return for FY 2020-21.]

<sup>15</sup>[For FY 2020-21, details of ITC for goods or services received in the previous financial year but ITC for the same was availed in returns filed for the months of April 2021 to September 2021 shall be declared here. Table 4(A) of FORM GSTR-3B may be used for filling up these details. However, any ITC which was reversed in the FY 2020-21 as per second proviso to sub-section (2) of section 16 but was reclaimed in FY 2021-22, the details of such ITC reclaimed shall be furnished in the annual return for FY 2021-22.]

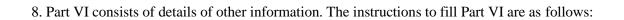




Table No.	Instructions
15A, 15B, 15C and 15D	Aggregate value of refunds claimed, sanctioned, rejected and pending for processing shall be declared here. Refund claimed will be the aggregate value of all the refund claims filed in the financial year and will include refunds which have been sanctioned, rejected or are pending for processing. Refund sanctioned means the aggregate value of all refund sanction orders. Refund pending will be the aggregate amount in all refund application for which acknowledgement has been received and will exclude provisional refunds received. These will not include details of non-GST refund claims.
	<sup>8</sup> [For <sup>13</sup> [FY 2017-18, <sup>18</sup> [2018-19, 2019-20 and 2020-21]], the registered person shall have an option to not fill this Table.]
15E, 15F and 15G	Aggregate value of demands of taxes for which an order confirming the demand has been issued by the adjudicating authority shall be declared here. Aggregate value of taxes paid out of the total value of confirmed demand as declared in 15E above shall be declared here. Aggregate value of demands pending recovery out of 15E above shall be declared here.
	<sup>8</sup> [For <sup>13</sup> [FY 2017-18, <sup>18</sup> [2018-19, 2019-20 and 2020-21]], the registered person shall have an option to not fill this Table.]
16A	Aggregate value of supplies received from composition taxpayers shall be declared here. Table 5 of FORM GSTR-3B may be used for filling up these details.
	<sup>8</sup> [For <sup>13</sup> [FY 2017-18, <sup>18</sup> [2018-19, 2019-20 and 2020-21]], the registered person shall have an option to not fill this Table.]
16B	Aggregate value of all deemed supplies from the principal to the job-worker in terms of sub-section (3) and sub-section (4) of Section 143 of the CGST Act shall be declared here.
	<sup>8</sup> [For <sup>13</sup> [FY 2017-18, <sup>18</sup> [2018-19, 2019-20 and 2020-21]], the registered person shall have an option to not fill this Table.]
16C	Aggregate value of all deemed supplies for goods which were sent on approval basis but were not returned to the principal supplier within one eighty days of such supply shall be declared here.
17 & 18	Summary of supplies effected and received against a particular HSN code to be reported only in this table. It will be optional for taxpayers having annual turnover upto ₹1.50 Cr. It will be mandatory to report HSN code at two digits level for taxpayers having annual turnover in the preceding year above ₹1.50 Cr but upto ₹5.00 Cr and at four digits' level for taxpayers having annual turnover above ₹5.00 Cr. UQC details to be furnished only for supply of goods. Quantity is to be reported net of returns. Table 12 of FORM GSTR-1 may be used for filling up details in Table 17. It may be noted that this summary details are required to be declared only for those inward supplies which in value independently account for 10 % or more of the

S *SERVING G	K. AGRA	Com. 14 P
0,7	ACTITIONERS	X Youngh

	total value of inward supplies.
	$^{8}$ [For $^{13}$ [FY 2017-18, $^{18}$ [2018-19, 2019-20 and 2020-21]], the registered person shall have an option to not fill this Table.]
19	Late fee will be payable if annual return is filed after the due date.

9. Towards the end of the return, taxpayers shall be given an option to pay any additional liability declared in this form, through FORM DRC-03. Taxpayers shall select "Annual Return" in the drop down provided in FORM DRC-03. It may be noted that such liability can be paid through electronic cash ledger only.

- 1. Substituted by Notification No.1090-F.T. dated 28.06.2019 w. e. f. 28.06.2019 for "September, 2018".
- 2. Substituted by Notification No.1090-F.T. dated 28.06.2019 w. e. f. 28.06.2019 for "previous FY declared in returns of April to September of current FY or upto date of filing of annual return of previous FY whichever is earlier".
- 3. Omitted by Notification No.1090-F.T. dated 28.06.2019 w. e. f. 28.06.2019 the following: —
  "It may be noted that additional liability for the FY 2017-18 not declared in FORM GSTR-1 and FORM GSTR-3B may be declared in this return. However, taxpayers cannot claim input tax credit unclaimed during FY 2017-18 through this return."
- 4. Inserted by Notification No.1090-F.T. dated 28 .06.2019 w. e. f. 28.06.2019.
- 5. Substituted by Notification No.1090-F.T. dated 28.06.2019 w. e. f. 28.06.2019 for "of April to September of current FY or date of filing of Annual Return for previous financial year (for example in the annual return for the FY 2017-18, the transactions declared in April to September 2018 for the FY 2017-18 shall be declared), whichever is earlier".
- 6. Substituted by Notification No.1090-F.T. dated 28 .06.2019 w. e. f. 28.06.2019 for "to September of the current financial year or date of filing of Annual Return for the previous financial year, whichever is earlier".
- 7. Substituted by Notification No.1090-F.T. dated 28 .06.2019 w. e. f. 28.06.2019 for "to September of the current financial year or date of filing of Annual Return for the previous financial year whichever is earlier".
- 8. Inserted by Notification No.1878-F.T. dated 22.11.2019 w. e. f. 14.11.2019.
- 9. Substituted by ibid the following: -
- "It is mandatory to file all your FORM GSTR-1 and FORM GSTR-3B for the FY 2017-18 before filing this return. The details for the period between July 2017 to March 2018 are to be provided in this return."
- 10. Omitted by ibid the phrase "unclaimed during FY 2017-18".
- 11. Substituted by ibid the phrase "FY 2017-18".
- 12. Inserted by Notification No.867-F.T. dated 04.09.2020 w. e. f. 15.10.2020.
- 13. Substituted by ibid for "FY 2017-18 and 2018-19".
- 14. Substituted by ibid for the following:-
  - "Aggregate value of input tax credit availed on all inward supplies (except those on which tax is payable on reverse charge basis but includes supply of services received from SEZs) received during July 2017 to March 2018 but credit on which was availed between April 2018 to March 2019 shall be declared here. Table 4(A)(5) of FORM GSTR-3B may be used for filling up these details."
- 15. Inserted by Notification No. 951-F.T. dated 06.09.2021 w.e.f. 01.08.2021.
- 16. Substituted by Notification No. 951-F.T. dated 06.09.2021 w.e.f. 01.08.2021 for "and 2019-20".
- 17. Substituted by Notification No. 951-F.T. dated 06.09.2021 w.e.f. 01.08.2021 for "FY 2019-20".
- 18. Substituted by Notification No. 951-F.T. dated 06.09.2021 w.e.f. 01.08.2021 for "2018-19 and 2019-20".

<sup>&</sup>lt;sup>#</sup> Substituted by Notification No.1893-F.T. dated 31 .12.2018 w. e. f. 31.12.2018.



# **#FORM GSTR-9A**

(See rule 80)

# **Annual Return (For Composition Taxpayer)**

Pt. I	Basic Details						
1	Financial Year						
2	GSTIN						
3A	Legal Name	<auto></auto>					
3B	Trade Name (if any)	<auto></auto>					
- 02	Period of composition schem	Period of composition scheme during the year (From					
4	To)						
5	Aggregate Turnover of Previous Financial Year						
						(Amount in ₹	in all tables)
Pt. II		ard and inward	supplies declar	red in retur	ns filed during th	e financial year	
	Description	Turnover	Rate of Tax	Central Tax	State / UT Tax	Integrated tax	Cess
	1	2	3	4	5	6	7
6	Details of Outward sup	oplies on which	tax is payable a	s declared i	in returns filed d	uring the financ	ial year
A	Taxable						
В	Exempted, Nil-rated						
С	Total						
7	Details				e on reverse char	ge basis	
,			bit/credit notes				~
	Description	Taxable Value	Central	Tax	State Tax / UT Tax	Integrated Tax	Cess
	1	2	3		4	5	6
	Inward supplies liable to						
A	reverse charge received						
	from registered persons						
	Inward supplies liable to						
D	reverse charge received						
В	from unregistered persons						
	Y						
С	Import of services						
D	Net Tax Payable on (A), (B) and (C) above						
8	Details of oth	ner inward supp	lies as declared	l in returns	filed during the f	inancial year	
	Inward supplies from						
A	registered persons (other than 7A above)						
В	Import of Goods						
Pt. III	-	s of tax paid as	declared in ret	urns filed d	uring the financia	al vear	
9	Description	para us	Total tax p		Pa		
	1		2	. •	3		
	Integrated Tax		2				
	Central Tax						

	State/UT Tax							ERVING OS
	Cess							PRACTITION
	Interest							
	Late fee							
	Penalty							
Pt. IV	Particulars of					rns of April to Se FY whichever is		rent FY or
		Description		Turnover	Central Tax	State Tax / UT Tax	Integrated Tax	Cess
	1			2	3	4	5	6
10	Supplies / tax (o Amendments (+							
11	Inward supplies declared through debit notes)							
12	Supplies / tax (o Amendments (-)							
13	Inward supplies reduced through Amendments (-)		_					
14		Differen	tial tax paid on	account of decl	aration mad	de in 10, 11, 12 &	13 above	
		Desc	cription		I	Payable	Pa	id
			1		2		3	1
	Integrated Tax							
	Central Tax							
	State/UT Tax							
	Cess							
D. 17	Interest							
Pt. V			Dow	Other Info		-f J-		
15	Description	Central	State Tax /	iculars of Dem Integrated		Interest	Penalty	Late Fee /
		Tax	UT Tax	Tax				Others
	1	2	3	4	5	6	7	8
A	Total Refund claimed							
В	Total Refund sanctioned							
С	Total Refund Rejected							
D	Total Refund Pending							
Е	Total demand of taxes							
F	Total taxes paid in respect of E above							
G	Total demands pending out of E above							

16	Details of credit reversed or availed				
	Description	Central Tax	State Tax / UT Tax	Integrated Tax	Се
	1	2	3	4	5
A	Credit reversed on opting in the composition scheme (-)				
В	Credit availed on opting out of the composition scheme (+)				
17	Late fee paya	ble and paid	d		
	Description	F	Payable	Pai	id
	1		2	3	
A	Central Tax				
В	State Tax				

## Verification:

I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed there from and in case of any reduction in output tax liability the benefit thereof has been/will be passed on to the recipient of supply.

Place		Signature	N
Date			Name of Authorised Signatory
	Designation / Status		



## **Instructions:** –

- 1. It is mandatory to file all your FORM GSTR-4 for the FY 2017-18 before filing this return. The details for the period between July 2017 to March 2018 shall be provided in this return.
- 2. It may be noted that additional liability for the FY 2017-18 not declared in FORM GSTR-4 may be declared in this return.
- 3. Part I consists of basic details of taxpayer. The instructions to fill Part I are as follows:—

Table No.	Instructions
5	Aggregate turnover for the previous financial year is the turnover of the
	financial year previous to the year for which the return is being filed. For example, for the annual return for FY 2017-18, the aggregate turnover of FY
	2016-17 shall be entered into this table. It is the sum total of turnover of all taxpayers registered on the same PAN.

4. Part II consists of the details of all outward and inward supplies in the financial year for which the annual return is filed. The instructions to fill Part II are as follows:

TCtulii 18 III	ed. The instructions to fill Part II are as follows:
Table No.	Instructions
6A	Aggregate value of all outward supplies net of debit notes / credit notes, net of
	advances and net of goods returned for the entire financial year shall be
	declared here. Table 6 and Table 7 of <b>FORM GSTR-4</b> may be used for filling
	up these details.
6B	Aggregate value of exempted, Nil Rated and Non-GST supplies shall be
	declared here.
7A	Aggregate value of all inward supplies received from registered persons on
	which tax is payable on reverse charge basis shall be declared here. Table 4B,
	Table 5 and Table 8A of <b>FORM GSTR-4</b> may be used for filling up these
	details.
7B	Aggregate value of all inward supplies received from unregistered persons
	(other than import of services) on which tax is payable on reverse charge basis
	shall be declared here. Table 4C, Table 5 and Table 8A of <b>FORM GSTR-4</b>
	may be used for filling up these details.
7C	Aggregate value of all services imported during the financial year shall be
	declared here. Table 4D and Table 5 of FORM GSTR-4 may be used for
	filling up these details.
8A	Aggregate value of all inward supplies received from registered persons on
	which tax is payable by the supplier shall be declared here. Table 4A and
	Table 5 of <b>FORM GSTR-4</b> may be used for filling up these details.
8B	Aggregate value of all goods imported during the financial year shall be
	declared here.

5. Part IV consists of the details of amendments made for the supplies of the previous financial year in returns of April to September of the current FY or date of filing of Annual Return for previous financial year (for example in the annual return for the FY 2017-18, the transactions declared in April to September 2018 for the FY 2017-18 shall be declared), whichever is earlier. The instructions to fill Part V are as follows:

Table No.	Instructions
10,11,12,13	Details of additions or amendments to any of the supplies already declared in
and 14	the returns of the previous financial year but such amendments were
	furnished in Table 5 (relating to inward supplies) or Table 7(relating to
	outward supplies) of FORM GSTR- 4 of April to September of the current
	financial year or upto the date of filing of Annual Return for the previous
	financial year, whichever is earlier shall be declared here.

6. Part V consists of details of other information. The instruction to fill Part V are as follows:

Table No.	Instructions
15A,	Aggregate value of refunds claimed, sanctioned, rejected and pending for
15B, 15C	processing shall be declared here. Refund claimed will be the aggregate value
and 15D	of all the refund claims filed in the financial year and will include refunds
	which have been sanctioned, rejected or are pending for processing. Refund
	sanctioned means the aggregate value of all refund sanction orders. Refund
	pending will be the aggregate amount in all refund application for which
	acknowledgement has been received and will exclude provisional refunds
	received. These will not include details of non-GST refund claims.
15E, 15F	Aggregate value of demands of taxes for which an order confirming the
and 15G	demand has been issued by the adjudicating authority has been issued shall be
	declared here. Aggregate value of taxes paid out of the total value of
	confirmed demand in 15E above shall be declared here. Aggregate value of
	demands pending recovery out of 15E above shall be declared here.
16A	Aggregate value of all credit reversed when a person opts to pay tax under the
	composition scheme shall be declared here. The details furnished in <b>FORM</b>
	ITC-03 may be used for filling up these details.
16B	Aggregate value of all the credit availed when a registered person opts out of
	the composition scheme shall be declared here. The details furnished in
	FORM ITC-01 may be used for filling up these details.
17	Late fee will be payable if annual return is filed after the due date.";

7. Towards the end of the return, taxpayers shall be given an option to pay any additional liability declared in this form, through **FORM DRC-03**. Taxpayers shall select "Annual Return" in the drop down provided in **FORM DRC-03**. It may be noted that such liability shall be paid through electronic cash ledger only.

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<sup>\*</sup>Substituted by Notification No.1893-F.T. dated 31 .12.2018 w. e. f. 31.12.2018.



# # FORM GSTR-9C

See rule 80(3)

## PART – A - Reconciliation Statement

Pt. I		Basic Details		
1	Financial Year			
2	GSTIN			
3A	Legal Name	< Auto>		
470	Trade Name			
3B	(if any)	<auto></auto>	701	
4	Are you liable to	audit under any Act?		ase specify>>
			`	in ₹ in all tables)
Pt. II	Reconciliat	ion of turnover declared in audited Annual Fina declared in Annual Return (GST		tement with turnover
5		Reconciliation of Gross Turnov	ver ver	
A	State / UT (For r	ling exports) as per audited financial statements for nulti-GSTIN units under same PAN the turnover sl audited Annual Financial Statement)		
В	Unbilled revenue	e at the beginning of Financial Year	(+)	
C	Unadjusted adva			
D	Deemed Supply	(+)		
Е	Credit Notes issu in the annual retu	(-)		
F	Trade Discounts Statement but are	(+)		
G	Turnover from A	April 2017 to June 2017	(-)	
Н	Unbilled revenue	e at the end of Financial Year	(-)	
I	Unadjusted Adva	ances at the beginning of the Financial Year	(-)	
J	Credit notes acco			
K	Adjustments on a Units			
L	Turnover for the			
M	Adjustments in t			
N	Adjustments in t	(+/-)		
О	Adjustments in t	urnover due to reasons not listed above	(+/-)	
P	Annual turnover	after adjustments as above		<auto></auto>



R	Un-Reconciled turnover (Q - P)						AT1
6		Reasons for	Un - Reco	nciled differen	ce in Annual	<b>Gross Turnover</b>	
A	Reason 1				< <text< th=""><th>&gt;&gt;</th><th></th></text<>	>>	
В	Reason 2				< <text< th=""><th>&gt;&gt;</th><th></th></text<>	>>	
С	Reason 3				< <text< th=""><th>&gt;&gt;</th><th></th></text<>	>>	
7			Reconc	ciliation of Tax	able Turnovo	er	
A	Annual turnover	after adjustn	nents (from	5P above)		<auto></auto>	
В	Value of Exemp	ted, Nil Rate	d, Non-GS7	Γ supplies, No-S	Supply turnov	er	
С	Zero rated suppl	ies without p	ayment of t	ax			
D	Supplies on which	ch tax is to be	e paid by the	e recipient on re	everse charge	basis	
Е	Taxable turnove	r as per adjus	tments abo	ve (A-B-C-D)		<auto></auto>	
F	Taxable turnove	r as per liabil	ity declared	l in Annual Retu	ırn (GSTR9)		
G	Unreconciled tax	xable turnove	er (F-E)			A	T 2
8	Reasons for Un - Reconciled difference in taxable turnover						
A	Reason	1			< <text< th=""><th>&gt;&gt;</th><th></th></text<>	>>	
В	Reason	2			< <text< th=""><th>&gt;&gt;</th><th></th></text<>	>>	
С	Reason	3			< <text< th=""><th>&gt;&gt;</th><th></th></text<>	>>	
Pt. III			R	econciliation of	f tax paid		
9		Reconcilia	tion of rate	e wise liability a	and amount j	payable thereon	
					Та	ıx payable	
	Description	Taxable	. Value	Central tax	State tax /	Integrated Tax	Cess, if
					UT tax		applicable
	1	2	,	3	4	5	6
A	5%						
В	5% (RC)						
С	12%						
D	12% (RC)						
Е	18%						
F	18% (RC)						
G	28%						
Н	28% (RC)						
I	3%						



J	0.25%							
K	0.10%							
<sup>4</sup> [K-1	Others						]	
L	Interest							
M	Late Fee							
N	Penalty							
О	Others							
P	Total amount to be paid as per tables above			<auto></auto>	<auto></auto>	<auto></auto>	<auto></auto>	
Q	Total amount paid as declared in Annual Return (GSTR 9)							
R	Un-reconciled payment of amount (PT1)							
10		I	Reasons for	un-reconciled	payment of a	mount		
A	Reason 1 < <text>&gt;</text>							
В	Reason 2			< <text>&gt;</text>				
C	Reason 3				< <text< td=""><td>&gt;&gt;</td><td></td></text<>	>>		
11	Additional amo	ount payabl	e but not pa	aid (due to reas	ons specified	under Tables 6,8 a	nd 10 above)	
					To be pa	id through Cash		
	Description	Taxabl	e Value	Central tax	State tax / UT tax	Integrated tax	Cess, if applicable	
	1	2	2	3	4	5	6	
	5%							
	12%							
	18%							
	28%							
	3%							
	0.25%							
	0.10%							
	<sup>4</sup> [Others						]	
	Interest							



Late Fee			
Penalty			
Others (please specify)			

	Others (please specify)							
Pt.			Reconcilia	tion of Input	 	TC)		
IV	Reconciliation of Net Input Tax Credit (ITC)							
12								
A	ITC availed as (For multi-GSTI	•						
В	ITC booked in 6	earlier Finand	cial Years cl Year	aimed in currer	nt Financial	(+)		
С	ITC booked in c Financial Years	urrent Financ	cial Year to	be claimed in s	ubsequent	(-)		
D	ITC availed as p	er audited fir	nancial state	ments or books	of account	l	<a< th=""><th>uto&gt;</th></a<>	uto>
Е	ITC claimed in A	Annual Retur	rn (GSTR9)					
F	Un-reconciled I	ГС					II	°C 1
13			Reasons for	un-reconciled	l difference i	n ITC		
A	Reason 1				< <text< th=""><th>t&gt;&gt;</th><th></th><th></th></text<>	t>>		
В	Reason 2 < <text>&gt;</text>							
С	Reason 3				< <text< th=""><th>t&gt;&gt;</th><th></th><th></th></text<>	t>>		
14	Reconciliation			nual Return (C inancial Stater			_	enses as per
	Descript	ion	on Value Amount of Total ITC			eligible ITC ailed		
	1			2	3			4
A	Purchases							
В	Freight / Carriag	ge .						
С	Power and Fuel							
D	Imported goods (Including received from SEZs)							
Е	Rent and Insurar	nce						
F	Goods lost, stole destroyed, writte disposed of by w or free samples	en off or						
G	Royalties							
Н	Employees' Cost	t (Salaries						



	wages, Bonus etc	c.)					
I	Conveyance char	rges					
J	Bank Charges						
K	Entertainment charges						
L	Stationery Exper (including postage						
M	Repair and Main	tenance					
N	Other Miscelland expenses	eous					
О	Capital goods						
P	Any other expen	se 1					
Q	Any other expen	se 2					
R	Total amount of ITC availed	eligible				< <a< th=""><th>.uto&gt;&gt;</th></a<>	.uto>>
S	ITC claimed in A Return (GSTR9)						
T	Un-reconciled ITC (ITC 2)						
15	Reasons for un - reconciled difference in ITC						
A	Reason 1	< <text>&gt;</text>					
В	Reason 2		< <text>&gt;</text>				
C	Reason 3		< <text>&gt;</text>				
16	Tax payable	on un-recor	nciled differ	ence in ITC (d	ue to reason	s specified in 13 and	15 above)
	Description			An	ount Payable		
	Central Tax						
	State/UT Tax						
	Integrated Tax						
	Cess						
	Interest						
	Penalty						
Pt. V		5[]	Additional I	Liability due to	non-reconc	iliation]	
					To be pa	nid through Cash	
	Description	Val	lue	Central tax	State tax / UT tax	Integrated tax	Cess, if applicable
	1	2	2	3	4	5	6
	5%						
	12%						



	1	i	
18%			
28%			
3%			
0.25%			
0.10%			
<sup>4</sup> [Others			]
Input Tax Credit			
Interest			
Late Fee			
Penalty			
Any other amount paid for supplies not included in Annual Return			
(GSTR 9)			
Erroneous refund to be paid back			
Outstanding demands to be settled			
Other (Pl. specify)			

## <sup>6</sup>[Verification of registered person:

I hereby solemnly affirm and declare that the information given herein above is true and correct and nothing has been concealed there from. I am uploading this self-certified reconciliation statement in FORM GSTR-9C. I am also uploading other statements, as applicable, including financial statement, profit and loss account and balance sheet, etc.]

#### Instructions: -

- 1. Terms used:
  - (a) GSTIN: Goods and Services Tax Identification Number
- 2. It is mandatory to file all your FORM **GSTR-1**, **FORM GSTR-3B** and **FORM GSTR -9** for the <sup>1</sup>[current financial year] before filing this return. <sup>2</sup>[For FY 2017-18,] the details for the period between July 2017 to March 2018 are to be provided in this statement for the financial year 2017-18. The reconciliation statement is to be filed for every GSTIN separately.
- 3. The reference to current financial year in this statement is the financial year for which the reconciliation statement is being filed for.
- 4. Part II consists of reconciliation of the annual turnover declared in the audited Annual Financial Statement with the turnover as declared in the Annual Return furnished in FORM GSTR-9 for this GSTIN. The instructions to fill this part are as follows:-

Table No.	Instructions

SERVINO ON	JYKK,com
ARACTITIONERS IN	

5A	The turnover as per the audited Annual Financial Statement shall be declared here. There may be cases where multiple GSTINs (State-wise) registrations exist on the same PAN. This is common for persons / entities with presence over multiple States. Such persons / entities, will have to internally derive their GSTIN wise turnover and declare the same here. This shall include export turnover (if any). It may be noted that reference to audited Annual Financial Statement includes reference to books of accounts in case of persons / entities having presence over multiple States.
5B	Unbilled revenue which was recorded in the books of accounts on the basis of accrual system of accounting in the last financial year and was carried forward to the current financial year shall be declared here. In other words, when GST is payable during the financial year on such revenue (which was recognized earlier), the value of such revenue shall be declared here.
	<sup>2</sup> [For <sup>3</sup> [FY 2017-18, <sup>7</sup> [2018-19, 2019-20 and 2020-21]], the registered person shall have an option to not fill this table. If there are any adjustments required to be reported, then the same may be reported in Table 5O.]
	(For example, if rupees Ten Crores of unbilled revenue existed for the financial year 2016-17, and during the current financial year, GST was paid on rupees Four Crores of such revenue, then value of rupees Four Crores rupees shall be declared here)
5C	Value of all advances for which GST has been paid but the same has not been recognized as revenue in the audited Annual Financial Statement shall be declared here.
	<sup>2</sup> [For <sup>3</sup> [FY 2017-18, <sup>7</sup> [2018-19, 2019-20 and 2020-21], the registered person shall have an option to not fill this table. If there are any adjustments required to be reported, then the same may be reported in Table 5O.]
5D	Aggregate value of deemed supplies under Schedule I of the CGST Act, 2017 shall be declared here. Any deemed supply which is already part of the turnover in the audited Annual Financial Statement is not required to be included here.
	<sup>2</sup> [For <sup>3</sup> [FY 2017-18, <sup>7</sup> [2018-19, 2019-20 and 2020-21], the registered person shall have an option to not fill this table. If there are any adjustments required to be reported, then the same may be reported in Table 5O.]
5E	Aggregate value of credit notes which were issued after 31 <sup>st</sup> of March for any supply accounted in the current financial year but such credit notes were reflected in the annual return (GSTR-9) shall be declared here.
	<sup>2</sup> [For <sup>3</sup> [FY 2017-18, <sup>7</sup> [2018-19, 2019-20 and 2020-21], the registered person shall have an option to not fill this table. If there are any adjustments required to be reported, then the same may be reported in Table 5O.]
5F	Trade discounts which are accounted for in the audited Annual Financial Statement but on which GST was leviable (being not permissible) shall be declared here.
	<sup>2</sup> [For <sup>3</sup> [FY 2017-18, <sup>7</sup> [2018-19, 2019-20 and 2020-21], the registered person shall have an option to not fill this table. If there are any adjustments required to be reported, then the same may be reported in Table 5O.]

5G	Turnover included in the audited Annual Financial Statement for April 2017 to June 2017 shall be declared here.
	<sup>2</sup> [For <sup>3</sup> [FY 2017-18, <sup>7</sup> [2018-19, 2019-20 and 2020-21], the registered person shall have an option to not fill this table. If there are any adjustments required to be reported, then the same may be reported in Table 5O.]
5H	Unbilled revenue which was recorded in the books of accounts on the basis of accrual system of accounting during the current financial year but GST was not payable on such revenue in the same financial year shall be declared here.
	<sup>2</sup> [For <sup>3</sup> [FY 2017-18, <sup>7</sup> [2018-19, 2019-20 and 2020-21], the registered person shall have an option to not fill this table. If there are any adjustments required to be reported, then the same may be reported in Table 5O.]
51	Value of all advances for which GST has not been paid but the same has been recognized as revenue in the audited Annual Financial Statement shall be declared here.
	<sup>2</sup> [For <sup>3</sup> [FY 2017-18, <sup>7</sup> [2018-19, 2019-20 and 2020-21], the registered person shall have an option to not fill this table. If there are any adjustments required to be reported, then the same may be reported in Table 5O.]
5J	Aggregate value of credit notes which have been accounted for in the audited Annual Financial Statement but were not admissible under Section 34 of the CGST Act shall be declared here.
	<sup>2</sup> [For <sup>3</sup> [FY 2017-18, <sup>7</sup> [2018-19, 2019-20 and 2020-21], the registered person shall have an option to not fill this table. If there are any adjustments required to be reported, then the same may be reported in Table 5O.]
5K	Aggregate value of all goods supplied by SEZs to DTA units for which the DTA units have filed bill of entry shall be declared here.
	<sup>2</sup> [For <sup>3</sup> [FY 2017-18, <sup>7</sup> [2018-19, 2019-20 and 2020-21], the registered person shall have an option to not fill this table. If there are any adjustments required to be reported, then the same may be reported in Table 5O.]
5L	There may be cases where registered persons might have opted out of the composition scheme during the current financial year. Their turnover as per the audited Annual Financial Statement would include turnover both as composition taxpayer as well as normal taxpayer. Therefore, the turnover for which GST was paid under the composition scheme shall be declared here.
	<sup>2</sup> [For <sup>3</sup> [FY 2017-18, <sup>7</sup> [2018-19, 2019-20 and 2020-21], the registered person shall have an option to not fill this table. If there are any adjustments required to be reported, then the same may be reported in Table 5O.]
5M	There may be cases where the taxable value and the invoice value differ due to valuation principles under section 15 of the CGST Act, 2017 and rules thereunder. Therefore, any difference between the turnover reported in the Annual Return (GSTR 9) and turnover reported in the audited Annual Financial Statement due to difference



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	in valuation of supplies shall be declared here.
	<sup>2</sup> [For <sup>3</sup> [FY 2017-18, <sup>7</sup> [2018-19, 2019-20 and 2020-21], the registered person shall have an option to not fill this table. If there are any adjustments required to be reported, then the same may be reported in Table 5O.]
5N	Any difference between the turnover reported in the Annual Return (GSTR9) and turnover reported in the audited Annual Financial Statement due to foreign exchange fluctuations shall be declared here.
	<sup>2</sup> [For <sup>3</sup> [FY 2017-18, <sup>7</sup> [2018-19, 2019-20 and 2020-21], the registered person shall have an option to not fill this table. If there are any adjustments required to be reported, then the same may be reported in Table 5O.]
50	Any difference between the turnover reported in the Annual Return (GSTR9) and turnover reported in the audited Annual Financial Statement due to reasons not listed above shall be declared here.
5Q	Annual turnover as declared in the Annual Return (GSTR 9) shall be declared here. This turnover may be derived from Sr. No. 5N, 10 and 11 of Annual Return (GSTR 9).
6	Reasons for non-reconciliation between the annual turnover declared in the audited Annual Financial Statement and turnover as declared in the Annual Return (GSTR 9) shall be specified here.
7	The table provides for reconciliation of taxable turnover from the audited annual turnover after adjustments with the taxable turnover declared in annual return (GSTR-9).
7A	Annual turnover as derived in Table 5P above would be auto-populated here.
7B	Value of exempted, nil rated, non-GST and no-supply turnover shall be declared here. This shall be reported net of credit notes, debit notes and amendments if any.
7C	Value of zero rated supplies (including supplies to SEZs) on which tax is not paid shall be declared here. This shall be reported net of credit notes, debit notes and amendments if any.
7D	Value of reverse charge supplies on which tax is to be paid by the recipient shall be declared here. This shall be reported net of credit notes, debit notes and amendments if any.
7E	The taxable turnover is derived as the difference between the annual turnover after adjustments declared in Table 7A above and the sum of all supplies (exempted, non-GST, reverse charge etc.) declared in Table 7B, 7C and 7D above.
7F	Taxable turnover as declared in Table $(4N-4G)+(10-11)$ of the Annual Return (GSTR9) shall be declared here.
8	Reasons for non-reconciliation between adjusted annual taxable turnover as derived from Table 7E above and the taxable turnover declared in Table 7F shall be specified here.

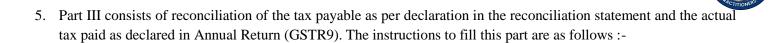


Table No.	Instructions
9	The table provides for reconciliation of tax paid as per reconciliation statement and amount of tax paid as declared in Annual Return (GSTR 9). Under the head labelled "RC", supplies where tax was paid on reverse charge basis by the recipient (i.e. the person for whom reconciliation statement has been prepared) shall be declared.
9P	The total amount to be paid as per liability declared in Table 9A to 9O is auto populated here.
9Q	The amount payable as declared in Table 9 of the Annual Return (GSTR9) shall be declared here. It should also contain any differential tax paid on Table 10 or 11 of the Annual Return (GSTR9).
10	Reasons for non-reconciliation between payable / liability declared in Table 9P above and the amount payable in Table 9Q shall be specified here.
11	Any amount which is payable due to reasons specified under Table 6, 8 and 10 above shall be declared here.

# 6. Part IV consists of reconciliation of Input Tax Credit (ITC). The instructions to fill Part IV are as under:-

Table No.	Instructions
12A	ITC availed (after reversals) as per the audited Annual Financial Statement shall be declared here. There may be cases where multiple GSTINs (State-wise) registrations exist on the same PAN. This is common for persons / entities with presence over multiple States. Such persons / entities, will have to internally derive their ITC for each individual GSTIN and declare the same here. It may be noted that reference to audited Annual Financial Statement includes reference to books of accounts in case of persons / entities having presence over multiple States.
12B	Any ITC which was booked in the audited Annual Financial Statement of earlier financial year(s) but availed in the ITC ledger in the financial year for which the reconciliation statement is being filed for shall be declared here. This shall include transitional credit which was booked in earlier years but availed during Financial Year 2017-18. <sup>2</sup> [For <sup>3</sup> [FY 2017-18, <sup>7</sup> [2018-19, 2019-20 and 2020-21], the registered person shall have an option to not fill this Table.]
12C	Any ITC which has been booked in the audited Annual Financial Statement of the current financial year but the same has not been credited to the ITC ledger for the said



	financial year shall be declared here.
	<sup>2</sup> [For <sup>3</sup> [FY 2017-18, <sup>7</sup> [2018-19, 2019-20 and 2020-21], the registered person shall have an option to not fill this Table.]
12D	ITC availed as per audited Annual Financial Statement or books of accounts as derived from values declared in Table 12A, 12B and 12C above will be autopopulated here.
12E	Net ITC available for utilization as declared in Table 7J of Annual Return (GSTR9) shall be declared here.
13	Reasons for non-reconciliation of ITC as per audited Annual Financial Statement or books of account (Table 12D) and the net ITC (Table12E) availed in the Annual Return (GSTR9) shall be specified here.
14	This table is for reconciliation of ITC declared in the Annual Return (GSTR9) against the expenses booked in the audited Annual Financial Statement or books of account. The various sub-heads specified under this table are general expenses in the audited Annual Financial Statement or books of account on which ITC may or may not be available. Further, this is only an indicative list of heads under which expenses are generally booked. Taxpayers may add or delete any of these heads but all heads of expenses on which GST has been paid / was payable are to be declared here.
	<sup>2</sup> [For <sup>3</sup> [FY 2017-18, <sup>7</sup> [2018-19, 2019-20 and 2020-21], the registered person shall have an option to not fill this Table.]
14R	Total ITC declared in Table 14A to 14Q above shall be auto populated here.
14S	Net ITC availed as declared in the Annual Return (GSTR9) shall be declared here. Table 7J of the Annual Return (GSTR9) may be used for filing this Table.
15	Reasons for non-reconciliation between ITC availed on the various expenses declared in Table 14R and ITC declared in Table 14S shall be specified here.
16	Any amount which is payable due to reasons specified in Table 13 and 15 above shall be declared here.

- 7. <sup>6</sup>[Part V consists of the additional liability to be discharged by the taxpayer due to non-reconciliation of turnover or non-reconciliation of input tax credit. Any refund which has been erroneously taken and shall be paid back to the Government shall also be declared in this table. Lastly, any other outstanding demand which is to be settled by the taxpayer shall be declared in this Table.]
- 8. Towards the end of the return, taxpayers shall be given an option to pay any additional liability declared in this form, through FORM DRC-03. Taxpayers shall select "Reconciliation Statement" in the drop down provided in FORM DRC-03. It may be noted that such liability shall be paid through electronic cash ledger only.

# PART – B- CERTIFICATION <sup>8</sup>[Omitted]

<sup>\*</sup>Substituted by Notification No. 1893-F.T. dated 31.12.2018 w. e. f. 31.12.2018.

- 1. Substituted by Notification No. 1878-F.T. dated 22.11.2019 w. e. f. 14.11.2019 for "FY 2017-18".
- 2. Inserted by Notification No. 1878-F.T. dated 22.11.2019 w. e. f. 14.11.2019.
- 3. Substituted by Notification No. 867-F.T. dated 04.11.2020.
- 4. Inserted by Notification No. 951-F.T. dated 06.09.2021 w.e.f. 01.08.2021.
- 5. Substituted by Notification No. 951-F.T. dated 06.09.2021 w.e.f. 01.08.2021 for "Auditor's recommendation on additional Liability due to non-reconciliation".
- 6. Substituted by Notification No. 951-F.T. dated 06.09.2021 w.e.f. 01.08.2021.
- 7. Substituted by Notification No. 951-F.T. dated 06.09.2021 w.e.f. 01.08.2021 for "2018-19 and 2019-20".
- 8. omitted by Notification No. 951-F.T. dated 06.09.2021 w.e.f. 01.08.2021.

# \*FORM GSTR-10





## **Final Return**

GSTIN
Legal name
Trade Name, if any
Address for future correspondence.
Effective date of cancellation of registration
(Date of closure of business or the date from which registration is to be cancelled)
Reference number of cancellation order
Date of cancellation order

8. Details of inputs held in stock, inputs contained in semi-finished or finished goods held in stock, and capital goods/plant and machinery on which input tax credit is required to be reversed and paid back to Government.

Sr. No	GSTIN	Invoi ill of Entry		Description of inputs held in stock, inputs contained in	Unit Quantity Code	Qty	Value (As adjusted by debit / credit note)	Input tax credit/  Tax payable (whichever is higher) (Rs.)						
		No.	Dat e	semi-finished or finished goods held in stock and capital goods /plant and machinery	(UQC)		credit note)	Central tax	State/ Union territory tax	Integrated tax	Cess			
1	2	3	4	5	6	7	8	9	10	11	12			
8 (a	) Inputs h	eld in	stock	(where invoice	is available)									
8 (b	) Inputs c	ontair	ned in	semi-finished or	finished go	ods hel	d in stock (wh	nere invoice	is availabl	e)				
8 (c	) Capital	goods	/plant	and machinery l	held in stock	3								
8 (d	) Inputs 1	held in	1 stoc	k or inputs as co	ntained in se	mi-fini	shed /finished	goods held	in stock (	where invoice				

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# 9. Amount of tax payable and paid (based on Table 8)

Sr. No.	Description	ITC reversible/Tax payable	Tax paid along with application for	Balance tax payable	Amount paid through			gh debit to elec ledger	
			cancellation of registration (GST REG- 16)	(3-4)	debit to electronic cash ledger	Central Tax	State/ Union territory Tax	Integrated Tax	Cess
1	2	3	4	5	6	7	8	9	10
1.	Central Tax								
2.	State/ Union territory Tax								
3.	Integrated Tax								
4.	Cess								

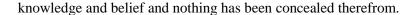
# 10. Interest, late fee payable and paid

Description	Amount payable	Amount Paid
1	2	3
(I) Interest on account of		
(a) Integrated Tax		
(b) Central Tax		
(c) State/Union territory Tax		
(d) Cess		
(II) Late fee		
(a) Central Tax		
(b) State/Union territory tax		

## 11. Verification

I hereby solemnly affirm and declare that the information given hereinabove is true and correct to the best of my

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Signature of authorized signatory	
Name	
Designation/Status	
	Date - dd/mm/yyyy

## **Instructions:**

- 1. This form is not required to be filed by taxpayers or persons who are registered as :-
  - (i) Input Service Distributors;
  - (ii) Persons paying tax under section 10;
  - (iii) Non-resident taxable person;
  - (iv) Persons required to deduct tax at source under section 51; and
  - (v) Persons required to collect tax at source under section 52.
- 2. Details of stock of inputs, inputs contained in semi-finished or finished goods and stock of capital goods/plant and machinery on which input tax credit has been availed.
- 3. Following points need to be taken care of while providing details of stock at Sl. No.8:
  - (i) where the tax invoices related to the inputs held in stock or inputs contained in semi-finished or finished goods held in stock are not available, the registered person shall estimate the amount under sub-rule (3) of rule 44 based on prevailing market price of the goods;
  - (ii) in case of capital goods/ plant and machinery, the value should be the invoice value reduced by  $1/60^{th}$  per month or part thereof from the date of invoice/purchase taking useful life as five years.
- 4. The details furnished in accordance with sub-rule (3) of rule 44 in the Table at S1. No. 8 (against entry 8 (d)) shall be duly certified by a practicing chartered accountant or cost accountant. Copy of the certificate shall be uploaded while filing the details.

<sup>\*</sup>Inserted by Notification No. 518-F.T. dated 18.04.2018 w. e. f. 18.04.2018.



## #Form GSTR -11

[See Rule 82]

## Statement of inward supplies by persons having Unique Identification Number (UIN)

				3	Year	•					
				7	Гах	Peri	od		·		
						ı					
1.	UIN										
2.	Name of the person having UIN	Auto populated									

## 3. Details of inward supplies received

(Amount in Rs. for all Tables)

GSTIN of supplier		nvoice/ ote/Cred detai	lit Note	Rate	Taxable value		Amount of tax						
	No	Date	Value			Integrated	Central	State/	CESS				
						tax	tax Tax UT Tax						
1	2	3	4	5	6	7	8	11					
3A. Invoid	ces rec	ceived											
3B. Debit/	Credi	t Note r	eceived										

## Verification

I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.

Place Signature

Name of Authorised Signatory

Date

Designation /Status

## **Instructions:-**

- 1. Terms Used:
  - a. GSTIN:- Goods and Services Tax Identification Number
  - b. UIN:- Unique Identity Number
- 2. Refund applications has to be filed in the same State in which the Unique Identity Number has been allotted.
- 3. For refund purposes only those invoices may be entered on which refund is sought.
- # Substituted by Notification No. 2313-F.T. dated 29.12.2017.



[See Rule 83(1]

# Application for Enrolment as Goods and Services Tax Practitioner $\underline{Part-\!A}$

State /UT - District -  $\bigvee$ 

(i)	Name of the Goods and Services Tax Practitioner		
	(As mentioned in PAN)		
(ii)	PAN		
(iii)	Email Address		
(iv)	Mobile Number		
Note -	Information submitted above is subject to online verifica	tion before proceeding to fill up Part-B.	
	PART B		
1.	Enrolling Authority	Centre	
		State	
2.	State/UT		
3.	Date of application		
4	Enrolment sought as:	(1) Chartered Accountant holding COP	
		(2) Company Secretary holding COP	
	(3) Cost and Management Accountant holding COP		; COP
		(4) Advocate	
		(5) Graduate or Postgraduate degree in Comm	erce
		(6) Graduate or Postgraduate degree in Bankin	ıg
		(7) Graduate or Postgraduate degree in Busine Administration	:SS
		(8) Graduate or Postgraduate degree in Busine Management	ess
		(9) Degree examination of any recognized For University	eign
		(10) Retired Government Officials <sup>®</sup> [(11) Sales Tax practitioner under existing law not less than five years	for a period of

(12) tax return preparer under existing law for a period of not

5.1 Membership Type (drop down will change based the institute selected )  5.2 Date of Enrolment / Membership  5.3 Membership Valid upto  6 Advocates registered with Bar (Name of Bar Council)  6.1 Registration Number as given by Bar  6.2 Date of Registration  6.3 Valid up to  7 Retired Government Officials  7.1 Date of Retirement  7.2 Designation of the post held at the time of retirement  8. Applicant Details  8.1 Full name as per PAN  8.2 Father's Name  8.3 Date of Birth  Photo  8.4 Photo  8.6 Aadhaar			SERV
5.1 Membership Type (drop down will change based the institute selected )  5.2 Date of Enrolment / Membership  5.3 Membership Valid upto  6 Advocates registered with Bar (Name of Bar Council)  6.1 Registration Number as given by Bar  6.2 Date of Registration  6.3 Valid up to  7 Retired Government Officials  7.1 Date of Retirement  7.2 Designation of the post held at the time of retirement  8. Applicant Details  8.1 Full name as per PAN  8.2 Father's Name  8.3 Date of Birth  Photo  8.4 Photo  8.6 Aadhaar			less than five years.]
Membership Type (drop down will change based the institute selected )  Date of Enrolment / Membership  Membership Valid upto  Advocates registered with Bar (Name of Bar Council)  Advocates registered with Bar (Name of Bar Council)  Late of Registration Number as given by Bar  Date of Registration  Avalid up to  Retired Government Officials  Retired from Centre/ State  Date of Retirement  Designation of the post held at the time of retirement  Applicant Details  Full name as per PAN  Father's Name  Date of Birth  Photo  Gender  Adahaar	5.	Membership Number	
based the institute selected )  Date of Enrollment / Membership  3.2 Date of Enrollment / Membership  3.3 Membership Valid upto  6.4 Advocates registered with Bar (Name of Bar Council)  6.1 Registration Number as given by Bar  6.2 Date of Registration  6.3 Valid up to  7 Retired Government Officials Retired from Centre/ State  7.1 Date of Retirement  7.2 Designation of the post held at the time of retirement any other document evidencing retirement  8. Applicant Details  8.1 Full name as per PAN  8.2 Father's Name  8.3 Date of Birth  8.4 Photo  8.5 Gender  8.6 Aadhaar <op> Abobile Number <pre></pre></op>	<b>7</b> 1	•	
5.2 Date of Enrolment / Membership 5.3 Membership Valid upto 6 Advocates registered with Bar (Name of Bar Council) 6.1 Registration Number as given by Bar 6.2 Date of Registration 6.3 Valid up to 7 Retired Government Officials Retired from Centre/ State 7.1 Date of Retirement 7.2 Designation of the post held at the time of retirement 8. Applicant Details 8.1 Full name as per PAN 8.2 Father's Name 8.3 Date of Birth 8.4 Photo 8.5 Gender 8.7 PAN < Pre filled from Part A> 8.8 Mobile Number 8.9 Landline Number 8.10 Email id <pre></pre>	5.1		
Advocates registered with Bar (Name of Bar Council)  Advocates registered with Bar (Name of Bar Council)  Date of Registration  Availed up to  Retired Government Officials  Retired from Centre/ State  Date of Retirement  Date of Retirement  Date of Retirement  Date of Retirement  Scanned copy of Pension Certificate issued by AG office or any other document evidencing retirement  Applicant Details  Hull name as per PAN  Lefter's Name  Date of Birth  Aghar coptional  Adahaar coptional  Adahaar coptional  Adahaar coptional  Adahaar coptional  Acadhaar coptional	5.2	·	
Bar Council) Registration Number as given by Bar  6.2 Date of Registration  6.3 Valid up to  7 Retired Government Officials Retired from Centre/ State  7.1 Date of Retirement  7.2 Designation of the post held at the time of retirement any other document evidencing retirement  8. Applicant Details  8.1 Full name as per PAN  8.2 Father's Name  8.3 Date of Birth  8.4 Photo  8.5 Gender  8.6 Aadhaar <optional> 8.7 PAN <pre></pre></optional>	5.3	Membership Valid upto	
6.1 Registration Number as given by Bar 6.2 Date of Registration 6.3 Valid up to 7 Retired Government Officials 7.1 Date of Retirement 7.2 Designation of the post held at the time of retirement any other document evidencing retirement 8. Applicant Details 8.1 Full name as per PAN 8.2 Father's Name 8.3 Date of Birth 8.4 Photo 8.5 Gender 8.6 Aadhaar optional> 8.7 PAN optional> 8.8 Mobile Number open filled from Part A> 8.9 Landline Number 8.10 Email id open filled from Part A> 8.9 Professional Address (Any three will be mandatory) 9.1 Building No/ Flat No/Door No. 9.2 Floor No. 9.3 Name of the Premises / Building optional option of the post held at the time of any other document evidencing retirement  8.10 Email of the post held at the time of any other document evidencing retirement  8.11 Scanned Copy of Pension Certificate issued by AG office or any other document evidencing retirement  8.12 Scanned Copy of Pension Certificate issued by AG office or any other document evidencing retirement  8.12 Scanned Copy of Pension Certificate issued by AG office or any other document evidencing retirement  8.12 Scanned Copy of Pension Certificate issued by AG office or any other document evidencing retirement  8.13 Scanned Copy of Pension Certificate issued by AG office or any other document evidencing retirement  8.14 Scanned Scann	6	_	
Retired Government Officials  Retired from Centre/ State  Date of Retirement  Scanned copy of Pension Certificate issued by AG office or retirement evidencing retirement  Applicant Details  Full name as per PAN  Father's Name  Aghar  Adhaar  Aghar  PAN  Professional Address  Aghicant Details  Aghar  Ag	6.1		
Retired Government Officials  Retired from Centre/ State  7.1 Date of Retirement  7.2 Designation of the post held at the time of retirement any other document evidencing retirement  8. Applicant Details  8.1 Full name as per PAN  8.2 Father's Name  8.3 Date of Birth  8.4 Photo  8.5 Gender  8.6 Aadhaar soptional>  8.7 PAN ser filled from Part A>  8.8 Mobile Number ser filled from Part A>  8.9 Landline Number  8.10 Email id ser filled from Part A>  9. Professional Address  9. Professional Address  9. Professional Flat No/Door No.  9.1 Building No/ Flat No/Door No.  9.2 Floor No.  9.3 Name of the Premises / Building  9.4 Road / Street Lane  9.5 Locality / Area / Village  9.6 District  9.7 State  9.8 PIN Code	6.2	Date of Registration	
Date of Retirement  Designation of the post held at the time of retirement  R. Applicant Details  8.1 Full name as per PAN  8.2 Father's Name  8.3 Date of Birth  8.4 Photo  8.5 Gender  8.6 Aadhaar <optional> 8.7 PAN   Ser filled from Part A&gt;  8.8 Mobile Number  8.9 Landline Number  8.10 Email id <pre> Professional Address (Any three will be mandatory)  9.1 Building No./ Flat No./Door No.  9.2 Floor No.  9.3 Name of the Premises / Building 9.4 Road / Street Lane  9.5 Locality / Area / Village  9.6 District  9.7 State  9.8 PIN Code</pre></optional>	6.3	Valid up to	
Designation of the post held at the time of retirement  Scanned copy of Pension Certificate issued by AG office or any other document evidencing retirement  R. Applicant Details  Full name as per PAN  Father's Name  B.3 Date of Birth  R.4 Photo  B.5 Gender  B.6 Aadhaar  PAN  PAN  Per filled from Part A>  Per filled from Part A>  R.9 Landline Number  R.10 Email id  Professional Address  (Any three will be mandatory)  Professional Address  (Any three will be mandatory)  Building No./ Flat No./Door No.  P.2 Floor No.  Name of the Premises / Building  Road / Street Lane  District  P. Code  PIN Code	7	Retired Government Officials	Retired from Centre/ State
retirement any other document evidencing retirement  8. Applicant Details  8.1 Full name as per PAN  8.2 Father's Name  8.3 Date of Birth  8.4 Photo  8.5 Gender  8.6 Aadhaar <optional> 8.7 PAN <optional> 8.8 Mobile Number <optional a="" from="" part="">  8.9 Landline Number  8.10 Email id <optional a="" from="" part="">  9. Professional Address (Any three will be mandatory)  9.1 Building No./ Flat No./Door No.  9.2 Floor No.  9.3 Name of the Premises / Building 9.4 Road / Street Lane  9.5 Locality / Area / Village  9.6 District  9.7 State  9.8 PIN Code</optional></optional></optional></optional>	7.1	Date of Retirement	
8.1 Full name as per PAN  8.2 Father's Name  8.3 Date of Birth  8.4 Photo  8.5 Gender  8.6 Aadhaar <optional> 8.7 PAN <pre> 8.8 Mobile Number <pre> 8.9 Landline Number  8.10 Email id <pre> 8.10 Email id <pre> 8.11 Professional Address (Any three will be mandatory)  9.1 Building No./ Flat No./Door No.  9.2 Floor No.  9.3 Name of the Premises / Building  9.4 Road / Street Lane  9.5 Locality / Area / Village  9.6 District  9.7 State  9.8 PIN Code</pre></pre></pre></pre></optional>	7.2	~	
Same	8.	Applicant Details	
8.3 Date of Birth  8.4 Photo  8.5 Gender  8.6 Aadhaar <optional> 8.7 PAN <pre> 8.8 Mobile Number <pre> 8.9 Landline Number  8.10 Email id <pre> 9. Professional Address (Any three will be mandatory)  9.1 Building No./ Flat No./Door No.  9.2 Floor No.  9.3 Name of the Premises / Building  9.4 Road / Street Lane  9.5 Locality / Area / Village  9.6 District  9.7 State  9.8 PIN Code</pre></pre></pre></optional>	8.1	Full name as per PAN	
8.4 Photo  8.5 Gender  8.6 Aadhaar	8.2	Father's Name	
8.5 Gender 8.6 Aadhaar	8.3	Date of Birth	
8.6 Aadhaar	8.4	Photo	
8.6 Aadhaar	8.5	Gender	
8.7 PAN	8.6		<ontional></ontional>
Mobile Number   Pre filled from Part A>			<pre><pre a="" filled="" from="" part=""></pre></pre>
8.10 Email id <pre a="" filled="" from="" part="">  9. Professional Address (Any three will be mandatory)  9.1 Building No./ Flat No./Door No.  9.2 Floor No.  9.3 Name of the Premises / Building  9.4 Road / Street Lane  9.5 Locality / Area / Village  9.6 District  9.7 State  9.8 PIN Code</pre>	8.8		
9. Professional Address (Any three will be mandatory) 9.1 Building No./ Flat No./Door No. 9.2 Floor No. 9.3 Name of the Premises / Building 9.4 Road / Street Lane 9.5 Locality / Area / Village 9.6 District 9.7 State 9.8 PIN Code	8.9	Landline Number	
9.1 Building No./ Flat No./Door No.  9.2 Floor No.  9.3 Name of the Premises / Building  9.4 Road / Street Lane  9.5 Locality / Area / Village  9.6 District  9.7 State  9.8 PIN Code	8.10	Email id	<pre a="" filled="" from="" part=""></pre>
9.2 Floor No. 9.3 Name of the Premises / Building 9.4 Road / Street Lane 9.5 Locality / Area / Village 9.6 District 9.7 State 9.8 PIN Code	9.	Professional Address	(Any three will be mandatory)
9.3 Name of the Premises / Building 9.4 Road / Street Lane 9.5 Locality / Area / Village 9.6 District 9.7 State 9.8 PIN Code	9.1	Building No./ Flat No./Door No.	
9.3 Name of the Premises / Building 9.4 Road / Street Lane 9.5 Locality / Area / Village 9.6 District 9.7 State 9.8 PIN Code	9.2	Floor No.	
9.4 Road / Street Lane 9.5 Locality / Area / Village 9.6 District 9.7 State 9.8 PIN Code	9.3		
9.6 District 9.7 State 9.8 PIN Code	9.4	-	
9.6 District 9.7 State 9.8 PIN Code	9.5	Locality / Area / Village	
9.7 State 9.8 PIN Code	9.6		
	9.7		
10. Qualification Details	9.8	PIN Code	
	10.	Qualification Details	

10.1	Qualifying Degree	VINO ON RATE		
10.2	Affiliation University / Institute			
	give consent to "Goods and Services Tax Nauthentication. "Goods and Services Tax Net	r <pre>r <pre>r <pre>pre-filled based on Aadhaar number provided in the form&gt; letwork" to obtain my details from UIDAI for the purpose of twork" has informed me that identity information would only be plder and will be shared with Central Identities Data Repository</pre></pre></pre>		
ļ	<sup>®</sup> [Declaration			
ļ	I hereby declare that:			
	(i) I am a citizen of India;			
	(ii) I am a person of sound mind;			
	<ul><li>(iii) I have not been adjudicated as an insolvent; and</li><li>(iv) I have not been convicted by a competent court.]</li></ul>			
Verification				
	I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.			
	Place	< DSC /E-sign of the Applicant/EVC>		
	Date	< Name of the Applicant>		

# Acknowledgment

Application Reference Number (ARN) -

You have filed the application successfully.

GSTIN, if available:

Legal Name:

Form No.:

Form Description:

Date of Filing:

Time of filing:

Center Jurisdiction:

State Jurisdiction:

Filed by:

Temporary reference number, (TRN) if any:

Place:

It is a system generated acknowledgement and does not require any signature.

Note - The status of the application can be viewed through "Track Application Status" at dash board on the GST Portal.

<sup>&</sup>lt;sup>®</sup>Inserted by Notification No.768-F.T. dated 13.06.2018 w. e. f. 01.07.2017.



# Form GST PCT-02

[See Rule 83(2)]

# **Enrolment Certificate of Goods and Services Tax Practitioner**

1.	Enrolment Number	
2.	PAN	
3.	Name of the Goods and Services Tax Practitioner	
4.	Address and Contact Information	
5.	Date of enrolment as GSTP	
Date		Signature of the Enrolment Authority
Name	e and Designation.	
		Centre / State



# Form GST PCT-03

[See Rule 83(4)]

Reference No.	Date
То	
Name	
Address of the Applicant	
GST practitioner enrolment No.	
Show Cause Notice	ce for disqualification
It has come to my notice that you are guilty of mis 1. 2.	sconduct, the details of which are given hereunder:
* *	
If you fail to furnish a reply within the stipulated date and time, the case will be decided ex parte on	date or fail to appear for personal hearing on the appointed the basis of available records and on merits
	Signature
	Name
	(Designation)



# Form GST PCT-04

[See Rule 83(4)]

Refer	ence No.	Date-
To Enroll	Name Address Iment Number	
		rolment as GST Practitioner
This h	- Whereas no reply to notice to show cause hat - Whereas on the day fixed for hearing you diture. Whereas the undersigned has examined you opinion that your enrolment is liable to be consistent.	as been submitted; or id not appear; or ar reply and submissions made at the time of hearing, and is of the
The ef	ffective date of cancellation of your enrolment i	s < <dd mm="" yyyy="">&gt;.</dd>
		Signature Name (Designation)







To

The Authorised Officer Central Tax/State Tax.

#### **PART-A**

Sir/Madam

I/We<Name of the Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc.) do hereby

- 1. \*solemnly authorise,
- 2. \*withdraw authorisation of

----- (Name of the Goods and Services Tax Practitioner), bearing Enrolment Number----- for the purposes of Section 48 read with rule 83 to perform the following activities on behalf of ----- (Legal Name) bearing << GSTIN ->>:

Sr.	List of Activities	Check box
No.		
1.	To furnish details of outward and inward supplies	
2.	To furnish monthly, quarterly, annual or final return	
3.	To make deposit for credit into the electronic cash ledger	
4.	To file an application for claim of refund	
5.	To file an application for amendment or cancellation of registration	
<sup>#</sup> [6.	To furnish information for generation of e-way bill	
7.	To furnish details of challan in <b>FORM GST ITC-04</b>	
8.	To file an application for amendment or cancellation of enrolment under rule 58	
9.	To file an intimation to pay tax under the composition scheme or withdraw from the said scheme]	

<sup>2.</sup> The consent of the ----- (Name of Goods and Services Tax Practitioner) is attached herewith\*.

Signature	OI 1	tne	authorised	signatory	1

Name

Designation/Status

Date	e			
Plac	ce			
				_

#Inserted by Notification No. 173-F.T. dated 29.01.2019 w. e. f. 01.02.2019.

<sup>\*</sup>Strike out whichever is not applicable.

## Part -B



### Consent of the Goods and Services Tax Practitioner

consent to a	of the Goods and Services Tax Practitioner>>< Enrolment Number> do hereby solemnly accord my act as the Goods and Services Tax Practitioner on behalf of (Legal name), GSTIN only in the activities specified by (Legal name), GSTIN
Signature	
	Name
Date	Enrolment No.



# **#FORM GST PCT-06**

[See rule 83B]

APPLICATION FOR CANCELLATION OF SERVICES TAX PRAC	
1. GSTP Enrolment No.	
2. Name of the GST Practitioner	<auto populated=""></auto>
3. Address	< Auto Populated>
4. Date of effect of cancellation of enrolment	
I hereby request for cancellation of enrolment as GS below:	ST Practitioner for the reason(s) noted
1.	
2.	
3.	
DECLARATIO	ON
The above declaration is true and correct to the undertake that I shall continue to be liable for my accancellation.	· ·
	(SIGNATURE)
Place:	
Date:	

# Inserted by Notification No. 1225-F.T. dated 19.07.2019 (Not yet made effective)



[See rule 83B]



ORDER OF CANCELLATION OF ENRO				
1. GSTP Enrolment No.				
2. Name of the GST Practitioner	< Auto Populated>			
3. Address	<auto populated=""></auto>			
4. No. and Date of application				
5. Date of effect of cancellation of enrolment				
DECLARATION				
This is to inform you that your enrolment as effect from	GST Practitioner is hereby cancelled with			
	(SIGNATURE)			
Place:				
Date:				

# Inserted by Notification No. 1225-F.T. dated 19.07.2019 (Not yet made effective)

# Results of Matching after filing of the Returns of September (to be filed by 20th October)

		Bil	ll of Entry No	. /Invoice/Debit								
			Note/Cre	edit Note	ITC/	Output Lia	ability			Interest		
	B# a m 4 la	Data	Ni	Tauchle Value	lusta annata d	0	State	0	lute amete d	Control	04-4-	0
Α.	Month	Date	Number	Taxable Value	Integrated	Central	/UT	Cess	Integrated	Central	State	Cess
A.1	Finally Accept				h - f O - m ( - m - h -	(		_1				
1		ces, De	ebit and Cred	it Notes of the mont	n or Septembe	r triat riave	matcne 	a I	NI:			
2	September September								Nil Nil			
A.2				it Notes of the mont was rectified in the re						n of the mo	nth of Augus	t filed
1	August								Nil			
2	August								Nil			
A.3				it Notes of the mont								
				pplier/recipient has i im is being allowed a				ling docu	ıment in his return (	of the mont	h of Septem	ber
1	Month								Refund			
2	Month								Refund			
B.	Mismatches/Duplicates that have led to increase of liability in the return for September filed by 20th October											
B.1				it Notes of the mont								
	20th August bu for month of Se			rectified in the retur 20th October	n for the month	of August	filed by	20th Se	ptember and have	become pa	yable in the	return
1	July								Two Months			
2	July								Two Months			
B.2	Details of Invoi September file			it Notes of the mont	h of August tha	t were four	nd to be	duplicat	es and have becom	ne payable	in the return	
1	August								One Month			
2	August								One Month			
B.3	Details of Invoi	ces, De	bit and Cred	it Notes of the mont	h of August wh	ere reversa	al was re	eclaimed	in violation of Sec	tion 42/43	and that ha	ve
	become payab	le in the	e return of Se	eptember filed by 20	th October							
1	August								One Month-high			
2	August								One Month-high			
C.				lead to increase of								
C.1	Details of Invo	oices, L	Debit and C	redit Notes of the I	month of Aug	ust that w	ere foui	nd to ha	ave mismatched i	n the retur	n of the mo	nth of
	•	•	•	but mismatch was					th of September	filed by 20	th October	and
	will become p	ayable	in the retu	n for month of Oct	tober to be file	ed 20th No	ovembe	er				
1	August								Two Months			
2	August								Two Months			

C.2 Details of Invoices, Debit and Credit Notes of the month of September that were found to be duplicate and will be become payable in the return for October to be filed by 20th November

1	September								One Month			
2	September								One Month			
C.3				lit Notes of the monti			versal wa	as reclai	imed in violation of	Section 42	/43 and that	will
	become payab	le in the	e return of O	ctober return to be fil	ed by 20th No	vember						
1	September								One Month-high			
2	September								One Month-high			
D.	Mismatches/D	uplicat	es that may	lead to increase of	f liability in th	e return fo	r Nover	nber to	be filed by 20th D	ecember		
D.1	Details of Invoi	ces, De	bit and Cred	it Notes of the month	n of September	r that have	been for	und to h	ave mismatched a	nd may bec	ome payable	in the
	return for Nove	mber to	be filed by 2	20th December in ca	ise mismatch r	not rectified	in the re	eturn for	October to be filed	by 20th No	ovember	
1	September								Nil/Two Months			
2	September								Nil/Two Months			

[See Rule 85(1)]

# Electronic Liability Register of Registered Person (Part–I: Return related liabilities)

(To be maintained at the Common Portal)

GSTIN -

Name (Legal) – Trade name, if any

Tax Period –

Act -Central Tax/State Tax/UT Tax/Integrated Tax/CESS/All

(Amount in Rs.)

(F.												(An	nount in I	KS.)			
Sr. No.	Date (dd/mm/ yyyy)	Reference No.	Ledger used for discharging	Description	Type of Transaction [Debit (DR)	Tax/UT Tax/Integrated Tax/CESS/Total) (Central Tax/Stat					x/State Tax	e (Payable) Tax/UT Tax/Integrated ESS/Total)					
			liability		(Payable)] / [Credit (CR) (Paid)/]	Tax	Interest	Penalty	Fee	Others	Total	Tax	Interest	Penalty	Fee	Others	Total
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18

#### Note -

- 1. All liabilities accruing due to return and payments made against the same will be recorded in this ledger.
- 2. Under description head liabilities due to opting for composition, cancellation of registration will also be covered in this part. Such liabilities shall be populated in the liability register of the tax period in which the date of application or order falls, as the case may be.
- 3. Return shall be treated as invalid if closing balance is positive. Balance shall be worked out by reducing credit (amount paid) from the debit (amount payable).
- 4. Cess means cess levied under Goods and Services Tax (Compensation to States) Act, 2017.

[See rule 85(1)]

Electronic Liability Register of Registered Person (Part-II: Other than return related liabilities) (To be maintained at the Common Portal)

Date-

Reference No.— GSTIN/Temporary Id — Name (Legal) – Trade name, if any –

Trade fiame, if any –

Period - From --To --- (dd/mm/yyyy)

Stay status - Stayed/Un-stayed

Act – Central Tax/State Tax/UT Tax/Integrated Tax/CESS /All

(Amount in Rs.)

(Amou nt in Rs.)	(dd/mm/yyyy	Reference No.	Tax Per if appli	,	Ledger used for discharging	Description	Type of Transaction *	Amount debited/credited (Central Tax/State Tax/UT Tax/Integrated Tax/CESS/amount undexisting law/Total)					
Sr. No.	,		From	То	liability			Tax	Interest	Penalty	Fee	Others	Total
1	2	3	4	5	6	7	8	9	10	11	12	13	14

	Balance (Payable)											
(Cent	(Central Tax/State Tax/UT Tax/Integrated Tax/ CESS/ amount under existing law/Total)											
Tax	Interest	Penalty	Fee	Others	Total	Status (Stayed / Un-stayed)						
15	15 16 17 18 19 20 21											

<sup>\*[</sup>Debit (DR) (Payable)] / [Credit (CR) (Paid)] / Reduction (RD)/ Refund adjusted (RF)]

- 1. All liabilities accruing, other than return related liabilities, will be recorded in this ledger. Complete description of the transaction shall be recorded accordingly.
- 2. All payments made out of cash or credit ledger against the liabilities would be recorded accordingly.
- 3. Reduction or enhancement in the amount payable due to decision of appeal, rectification, revision, review etc. will be reflected here.
- 4. Negative balance can occur for a single Demand ID also if appeal is allowed/partly allowed. Overall closing balance may still be positive.
- 5. Refund of pre-deposit can be claimed for a particular demand ID if appeal is allowed even though the overall balance may still be positive subject to the adjustment of the refund against any liability by the proper officer.
- 6. The closing balance in this part shall not have any effect on filing of return.
- 7. Reduction in amount of penalty would be automatic if payment is made within the time specified in the Act or the rules.
- 8. Payment made against the show cause notice or any other payment made voluntarily shall be shown in the register at the time of making payment through credit or cash. Debit and credit entry will be created simultaneously.

<sup>#</sup> Substituted by Notification no. 1570-F.t. dated 02.11.2018 w. e. f. 30.10.2018.

[See Rule 86(1)]

## **Electronic Credit Ledger of Registered Person**

(To be maintained at the Common Portal)

GSTIN – Name (Legal) – Trade name, if any -

Period - From ----- To ----- (dd/mm/yyyy)

Act -Central Tax/State Tax/UT Tax/Integrated Tax/CESS /All

(Amount in Rs.)

 $\nabla$ 

Sr No.	Date (dd/m m/	Refere nce No.	Tax Period, if any	Description (Source of credit &	Transaction Type [Debit (DR)			Credit /	Debit				В	alance a	availabl	e	
	уууу)			purpose of utilisation)	/ Credit (CR)]	Central Tax	State Tax	UT Tax	Integr ated Tax	CESS	Total	Central Tax	State Tax	UT Tax	Integr ated Tax	CESS	Total
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18

## **Balance of Provisional credit**

Sr. No.	Tax period	Amount of provisional credit balance									
140.		Central Tax	State Tax	UT Tax	Integrated Tax	Cess	Total				
1	2	3	4	5	6	7	8				

### **Mismatch credit (other than reversed)**

Sr. No.	Tax period		Amount of mismatch credit								
110.		Central Tax	State Tax	UT Tax	Integrated Tax	Cess	Total				
1	2	3	4	5	6	7	8				

### Note -

- 1. All type of credits as per return, credit on account of merger, credit due on account of pre-registration inputs, etc., credit due to opting out from composition scheme, transition etc. will be recorded in the credit ledger.
- 2. Description will include sources of credit (GSTR-3, GSTR-6 etc.) and utilisation thereof towards liability related to return or demand etc. Refund claimed from the ledger will be debited and if the claim is rejected, then it will be credited back to the ledger to the extent of rejection.

[See Rule 86(4) & 87(11))]

## Order for re-credit of the amount to cash or credit ledger on rejection of refund claim

Date –

- 1. GSTIN -
- 2. Name (Legal) –
- 3. Trade name, if any
- 4. Address –
- 5. Period / Tax Period to which the credit relates, if any –

From ----- To ----- cash / credit ledger

- 6. Ledger from which debit entry was made for claiming refund -
- 7. Debit entry no. and date -
- 8. Application reference no. and date –
- 9. No. and date of order vide which refund was rejected
- 10. Amount of credit -

Sr. No.	Act (Central Tax/State		Amount of credit (Rs.)									
	Tax/UT Tax/Integrated Tax/ CESS)	Tax	Interest	Penalty	Fee	Other	Total					
1	2	3	4	5	6	7	8					

Signature Name Designation of the officer

Note -

'Central Tax' stands for Central Goods and Services Tax; 'State Tax' stands for State Goods and Services Tax; 'UT Tax' stands for Union territory Goods and Services Tax; 'Integrated Tax' stands for Integrated Goods and Services Tax and 'Cess' stands for Goods and Services Tax (Compensation to States).

[See Rule 85(7), 86(6) & 87(12)]

# Application for intimation of discrepancy in Electronic Credit Ledger/Cash Ledger/Liability Register

1.	GSTIN			
2.	Name (Legal)			
3.	Trade name, if any			
4.	Ledger / Register in which discrepancy noticed	Credit ledger	Cash ledger Liability	register
5.	Details of the discrepancy	,		
	Date	Type of tax	Type of discrepancy	Amount involved
		Central Tax		
		State Tax		
		UT Tax		
		Integrated Tax		
		Cess		
6.	Reasons, if any			
7.	Verification			
	I hereby solemnly affirm correct to the best of my k		=	ven herein above is true and
				Signature
	Place		Name of Authorize	d Signatory
	Date Designation	n /Status		

'Central Tax' stands for Central Goods and Services Tax; 'State Tax' stands for State Goods and Services Tax; 'UT Tax' stands for Union territory Goods and Services Tax; 'Integrated Tax' stands for Integrated Goods and Services Tax and 'Cess' stands for Goods and Services Tax(Compensation to States)

[See Rule 87(1)]

## **Electronic Cash Ledger**

(To be maintained at the Common Portal)

GSTIN/Temporary Id -Name (Legal) -Trade name, if any

Period - From ----- To ----- (dd/mm/yyyy) Act -Central Tax/State Tax/UT Tax/Integrated Tax/CESS/All

(Amount in Rs.)

Sr. No.	Date of deposit	Tim e of depo	Report ing date	Refere nce No.	Tax Period, if	Descri ption	Type of Transaction  [Debit (DR) /	ransaction Tax/UT Tax/Integrated Tax/CESS/Total) (Central Tax/State Tax/UT Tax/I							T Tax/Inte	egrated			
	/Debit( dd/mm / yyyy)	sit	(by bank)		applicab le		Credit (CR)]	Tax	Inter	Penalt y	Fee	Other s	Total	Tax	Inter	Pena lty	Fee	Others	Total
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20

#### Note -

- 1. Reference No. includes BRN (Bank Reference Number), debit entry no., order no., if any, and acknowledgment No. of return in case of TDS & TCS credit.
- 2. Tax period, if applicable, for any debit will be recorded, otherwise it will be left blank.
- 3. GSTIN of deductor or tax collector at source, Challan Identification Number (CIN) of the challan against which deposit has been made, and type of liability for which any debit has been made will also recorded under the head "description".

- 4. Application no., if any, Show Cause Notice Number, Demand ID, pre-deposit for appeal or any other liability for which payment is being made will also be recorded under the head "description".
- 5. Refund claimed from the ledger or any other debits made against any liability will be recorded accordingly.
- 6. Date and time of deposit is the date and time of generation of CIN as reported by bank.
- 7. 'Central Tax' stands for Central Goods and Services Tax; 'State Tax' stands for State Goods and Services Tax; 'UT Tax' stands for Union territory Goods and Services Tax; 'Integrated Tax' stands for Integrated Goods and Services Tax and 'Cess' stands for Goods and Services Tax(Compensation to States)

# [See Rule 87(2)] Challan for deposit of goods and services tax

CPIN	< <auto after="" generated="" information="" of="" submission="">&gt;</auto>	Date < <current date="">&gt;</current>	Challan Expiry Date
GSTIN	< <filled auto="" in="" populated="">&gt;</filled>	Email address	< <auto populated="">&gt;</auto>
Name	< <auto populated="">&gt;</auto>	Mobile No.	< <auto populated="">&gt;</auto>
(Legal)			
Address	s < <auto populated="">&gt;</auto>		

	Details of Deposit(All Amount in Rs.)							
Government	Major			N	Inor Head			
	Head	Tax	Interest	Penalty	Fee	Others	Total	
Community	Central Tax ()							
Government of India	Integrated Tax ()							
	CESS () Sub-Total							
State (Name)	State Tax ()							
UT (Name)	UT Tax ()							
Total Challan An	nount							

Total Amount in words								
Mode of Payment (relevant	part will beco	me active v	vhen the	particular r	node is selected)			
□e-Payment		□Over the Counter (OTC)						
(This will include all modes of e-payment	R	Bank (Where cash or instrument is						
such as CC/DC and net banking. Taxpayer		oposed to be o						
will choose one of this)		-	Details of Instrument					
		Cash		Cheque	☐Demand Draft			
□NEFT/RTGS								
Remitting bank								
Beneficiary name			GST					
Beneficiary Account Number (CPI	N)		<cpin></cpin>					
Name of beneficiary bank			Reserve Bank f India					
Beneficiary Bank's Indian Financia	de (IFSC)	IFSC of	RBI					
Amount								
Note: Charges to	be separately	y paid by th	e person	making pa <u>r</u>	yment.			
Particulars of depositor								
Name								
Designation/ Status (Manager, part	ner etc.)							
Signature								
Date					_	_		
	Paid Chal	llan Informa	ation			_		
GSTIN						_		
Taxpayer Name								
Name of Bank								
Amount								
Bank Reference No. (BRN)/UTR								
CIN								
Payment Date								

Bank Ack. No. (For Cheque / DD	
deposited at Bank's counter)	

Note - UTR stands for Unique Transaction Number for NeFT / RTGS payment.

[See Rule 87(8)]

# Application for intimating discrepancy relating to payment

1.	GSTIN					
2.	Name (Legal)					
3.	Trade name, if any					
4.	Date of generation of challan from Common Portal					
5.	Common Portal Identification Number (CPIN)					
6.	Mode of payment (tick one)	Net banking	CC/DC	□ NEFT/R	TGS O	TC
7.	Instrument detail, for OTC payment only	Cheque / Draft No.	Date		Bank/branc drawn	h on which
8.	Name of bank through which payment made					
9.	Date on which amount debited / realized					
10.	Bank Reference Number (BRN)/ UTR No., if any					
11.	Name of payment gateway (for CC/DC)					
12.	Payment detail	Central Tax	State Tax	UT Tax	Integrated Tax	Cess

13.	Verification (by authorized signatory)									
	•	y solemnly affirm and declare that the information given herein above is to the best of my knowledge and belief.								
	Signature									
	Place		Ν	Name of Aut	thorized Signa	atory				
	Date	Designation /Stat	us							

### Note -

- 1. The application is meant for the taxpayer where the amount intended to be paid is debited from his account but CIN has not been conveyed by bank to Common Portal or CIN has been generated but not reported by concerned bank.
- 2. The application may be filed if CIN is not conveyed within 24 hours of debit.
- 3. Common Portal shall forward the complaint to the Bank concerned and intimate the aggrieved person.
- 4. 'Central Tax' stands for Central Goods and Services Tax; 'State Tax' stands for State Goods and Services Tax; 'UT Tax' stands for Union territory Goods and Services Tax; 'Integrated Tax' stands for Integrated Goods and Services Tax and 'Cess' stands for Goods and Services Tax (Compensation to States).



## **#FORM GST PMT-09**

[See rule 87(13)]

### Transfer of amount from one account head to another in electronic cash ledger

1.	GSTIN	
2.	(a) Legal name	<auto></auto>
	(b) Trade name, if any	<auto></auto>
3.	ARN	
4.	Date of ARN	

5. Details of the amount to be transferred from one account head to another

(Amount in Rs.)

Amount to be tr	ansferred f	rom	Amount to be transferred to				
Major head	Minor head	Amount available	Major Head	Minor head	Amount transferred		
1	2	3	4	5	6		
<central tax,<br="">State/ UT tax,</central>	Tax		<central state<="" tax,="" td=""><td>Tax</td><td></td></central>	Tax			
Integrated tax,	Interest		/ UT tax	Interest			
Cess>	Penalty			Penalty			
	Fee		tax, Cess>	Fee			
	Others			Others			
	Total			Total			

### 6. Verification

I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.

Place	Signature
	Name of Authorized Signatory
Date	
	Designation /Status

### **Instructions -**



- 1. Major head refers to Integrated tax, Central tax, State/UT tax and Cess.
- 2. Minor head refers to  $-\tan x$ , interest, penalty, fee and others.
- 3. The form may be filled up if amount from one major / minor head is intended to be transferred to another major/minor head. Minor head for transfer of amount may be same or different.
- 4. The amount from one minor head can also be transferred to another minor head under the same major head.
- 5. Amount can be transferred from the head only if balance under that head is available at the time of transfer."

<sup>\*</sup>Inserted by Notification No.1090-F.T. dated 28 .06.2019 w. e. f. 21.04.2020 (vide notification No. 37/2020-Central Tax dated 28.04.2020).



# #FORM-GST-RFD-01

[See rule 89(1)]

# **Application for Refund**

(Applicable for casual or non-resident taxable person, tax deductor, tax collector, un-registered person and other registered taxable person)

1.	GSTIN / Temporary ID									
2.	Legal Name									
3.	Trade Name, if any									
4.	Address									
5.	Tax period (if applicable)	From <	Year><	(Mont	th> To	<\	ear> <mo< td=""><td>onth&gt;</td><td></td></mo<>	onth>		
6.	Amount of Refund Claimed	Act	Ta	X	Interest	Penalty	Fees	Others	Total	
	(Rs.)	Central tax								
		State/ UT tax								
		Integrated tax								
		Cess								
		Total								
7.	Grounds of refund	(a)	(a) Excess balance in Electronic Cash Ledger							
	claim (select from drop down)	(b)	Exports of services- with payment of tax							
		(c)	Expoi	rts of	goods / ser	vices- wit	hout pay	ment of tax	(accumulated	
		(d)	On ac	count	of order					
			Sl. No.	Тур	e of order	Order No.	Order date	Order Issuing Authority	Payment reference No., if any	
			(i)	Asse	essment					
			(ii)	Prov	lisation of visional ssment					
			(iii)	App	eal					

	<del></del>	<del></del>	(iv) Any other
			(iv) Any other order (specify)
		(e)	ITC accumulated due to inverted tax structure
			[clause (ii) of first proviso to section 54(3)]
		(f)	On account of supplies made to SEZ unit/ SEZ developer (with payment of tax)
		(g)	On account of supplies made to SEZ unit/ SEZ developer (without payment of tax)
		(h)	Recipient of deemed export supplies/Supplier of deemed export supplies
		(i)	Tax paid on a supply which is not provided, either wholly or partially, and for which invoice has not been issued (tax paid on advance payment)
		(j)	Tax paid on an intra-State supply which is subsequently held to be inter-State supply and vice versa(change of POS)
		(k)	Excess payment of tax, if any
		(1)	Any other (specify)
8.	Details of Bank account	Name of bank	Address of branch IFSC Type of account Account No.
9.	Whether Self-Declaration 54(4), if applicable	on filed by App	olicant u/s Yes No



## **DECLARATION** [second proviso to section 54(3)]

I hereby declare that the goods exported are not subject to any export duty. I also declare that I have not availed any drawback of central excise duty/service tax/central tax on goods or services or both and that I have not claimed refund of the integrated tax paid on supplies in respect of which refund is claimed

Signature Name – Designation / Status

DECLARATION [section 54(3)(ii)]
I hereby declare that the refund of input tax credit claimed in the application does not include ITC availed on goods or services used for making 'nil' rated or fully exempt supplies.
Signature
Name –
Designation / Status
*DECLARATION [rule 89(2)(f)]
I hereby declare that tax has not been collected from the Special Economic Zone unit /the Special Economic Zone developer in respect of supply of goods or services or both covered under this refund claim.
Signature
Name – Designation / Status
*DECLARATION [rule 89(2)(g)]
(For recipient/supplier of deemed export)
In case of refund claimed by recipient
I hereby declare that the refund has been claimed only for those invoices which have been detailed in statement 5B for the tax period for which refund is being claimed and the amount does not exceed the amount of input tax credit availed in the valid return filed for the said tax period. I also declare that the supplier has not claimed refund with respect to the said supplies.
In case of refund claimed by supplier
I hereby declare that the refund has been claimed only for those invoices which have been detailed in statement 5B for the tax period for which refund is being claimed. I also declare that the recipient has not claimed refund with respect to the said supplies and also the recipient has not availed any input tax credit on such supplies.
Signature Name –
Designation / Status

## &UNDERTAKING



I hereby undertake to deposit to the Government the amount of refund sanctioned along with interest in case of non-receipt of foreign exchange remittances as per the proviso to section 16 of the IGST Act, 2017 read with rule 96B of the WBGST Rules 2017.

Signature

Name -

Designation / Status".

### **UNDERTAKING**

I hereby undertake to pay back to the Government the amount of refund sanctioned along with interest in case it is found subsequently that the requirements of clause (c) of sub-section (2) of section 16 read with sub-section (2) of section 42 of the CGST/SGST Act have not been complied with in respect of the amount refunded. Signature

Name –

Designation / Status

<b>DECLARATION</b> [rule 89(2)(1)]
I (Applicant) having GSTIN/ temporary Id, solemnly affirm and certify that in respect of the refund amounting to Rs with respect to the tax, interest, or any other amount for the period fromto, claimed in the refund application, the incidence of such tax and interest has not been passed on to any other person.
Signature
Name –
Designation / Status
(This Declaration is not required to be furnished by applicants who are claiming refund under clause (a) or clause (b) or clause (c) or clause (d) or clause (f) of sub-section (8) of section 54.)

### 10. Verification

I/We <Taxpayer Name> hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my/our knowledge and belief and nothing has been concealed therefrom.

I/We declare that no refund on this account has been received by me/us earlier.

Place Signature of Authorised Signatory

Date (Name)

Designation/Status

<sup>&</sup>lt;sup>&</sup> Inserted by Notification No. 443-F.T. dated 03.04.2020 w.e.f. 23.03.2020.



### **Annexure-1**

## **Statement -1 [rule 89(5)]**

Refund Type: ITC accumulated due to inverted tax structure [clause (ii) of first proviso to section 54(3)]

(Amount in Rs.)

Turnover of inverted rated supply of goods and services	Tax payable on such inverted rated supply of goods and services	Adjusted total turnover	Net input tax credit	Maximum refund amount to be claimed [(1×4÷3)-2]
1	2	3	4	5

# <sup>1</sup>Statement 1A [rule 89(2)(h)]

Refund Type: ITC accumulated due to inverted tax structure [clause (ii) of first proviso to section 54(3)]

	Details of documents of inward supplies received of inputs received					Tax paid on inward supplies			Details of documents of outward supplies issued				Tax paid on outward supplies					
S 1. N o .	Ty pe of In wa rd Su ppl y	GSTI N of Suppli er/Sel f GSTI N	Type of Doc ume nt	No. /B/ E	Po rt C od e	D at e	Tax abl e Val ue	Inte grate d Tax	Ce ntr al Ta x	Stat e/U T Tax	Typ e of Out war d Sup ply	Type of Doc ume nt	N 0	D at e	Tax abl e Val ue	Inte grate d Tax	Ce ntr al Ta x	Stat e/U T Tax
1	2	3	4	5	6	7	8	9	10	11	12	13	1 4	1 5	16	17	18	19
											B2B /B2 C							",

<sup>1.</sup> Statement IA has been substituted by notification No.1878-F.T. dated 22.11.2019 w. e. f. 14.11.2019 for the following:-

### "Statement 1A [rule 89(2)(h)]

Refund Type: ITC accumulated due to inverted tax structure [clause (ii) of first proviso to section 54(3)]

Sl.	Details of invoices of inward	Tax paid on inward supplies of	Details of invoices of	Tax paid on outward
No.	supplies of inputs received	inputs	outward supplies issued	supplies

	GSTIN of the Supplier *	No .	Date	Taxabl e Value	Integrate d Tax	Central Tax	State Tax / Union territory Tax	No .	Date	Taxabl e Value	Invoice type (B2B/ B2C)	Integrate d Tax	Centr l Tax	/Union territor y Tax
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

<sup>\*</sup>In case of imports or supplies received under reverse charge mechanism [sub-section (3) of section 9 of CGST/SGST Act or sub-section (3) of section 5 of IGST Act], the GSTIN of supplier will mean GSTIN of applicant (recipient)."

# <sup>2</sup>Statement 2 [rule 89(2)(c)]

Refund Type: Export of services with payment of tax <sup>2a</sup>[Omitted]

Sr. No.	I	Docun	nent De	tails		Integrated Tax	Cess	BRC/ FIRC			
B1. 110.	Type of Document No. Date Value Taxable value				miegraied rux	CCSS	No.	Date	Value		
1	2	3	4	5	7	8	9	10	11	12	

<sup>2.</sup> Statement 2 has been substituted by notification No.1878-F.T. dated 22.11.2019 w. e. f. 14.11.2019 for the following:-2a. Omitted the brackets and words "(accumulated ITC)" by Notification No. 867-F.T. dated 04.11.2020 w.e.f. 15.10.2020.

### "Statement- 2 [rule 89(2)(c)]

Refund Type: Exports of services with payment of tax

(Amount in Rs.)

Sl.	Inv	oice dei	tails	Integrated	l tax	Cess	BRC	FIRC	Integrated	Integrated	Net Integrated
No.	No.	Date	Value	Taxable	Amt.		No.	Date	tax and cess	tax and cess	tax and cess
				value					involved in debit	involved in credit	(6+7+10 - 11)
									note,	note,	
									if any	if any	
1	2	3	4	5	6	7	8	9	10	11	12
											,,

# <sup>3</sup>Statement 3 [rule 89(2)(b) and rule 89(2)(c)]

### **Refund Type: Export without payment of tax (accumulated ITC)**

Sr.					Goods/ Services	Shipping bill/ Bill of export				GM tails	BRC/ FIRC		
No.	Type of Document	No.	Date	Value	(G/S)	Port code	No.	Date	Ref No.	Date	No.	Date	Value
1	2	3	4	5	6	7	8	9	10	11	12	13	14

<sup>3.</sup> Statement 3 has been substituted by notification No.1878-F.T. dated 22.11.2019 w. e. f. 14.11.2019 for the following:"Statement-3 [rule 89(2)(b) and 89(2)(c)]

(Amount in Rs.)



Sl.	Invoice details		Goods/ Services	Shipping bill/Bill of export			EGM L	Petails	BRC/ FIRC		
No.	No.	Date	Value	(G/S)	Port code	No.	Date	Ref No.	Date	No.	Date
1	2	3	4	5	6	7	8	9	10	11	12
											,,

### Statement- 3A [rule 89(4)]

Refund Type: Export without payment of tax (accumulated ITC) – calculation of refund amount

(Amount in Rs.)

Turnover of zero rated supply of goods and services	Net input tax credit	Adjusted total turnover	Refund amount (1×2÷3)
1	2	3	4

# <sup>4</sup>Statement 4 [rule 89(2)(d) and rule 89(2)(e)] Refund Type: On account of supplies made to SEZ unit or SEZ Developer (on payment of tax)

GSTIN of recipient	Doo	cument	Details		bill/ exp End invo	pping Bill of port/ orsed ice by EZ	Taxable Value	Integrated Tax	Cess
	Type of Document	No.	Date	Value	No.	Date			
1	2	3	4	5	6	7	8	9	10

<sup>4.</sup> Statement 4 has been substituted by notification No.1878-F.T. dated 22.11.2019 w. e. f. 14.11.2019 for the following:-"Statement-4 [rule 89(2)(d) and 89(2)(e)]

Refund Type: On account of supplies made to SEZ unit or SEZ Developer (on payment of tax) (Amount in Rs.)

GSTIN of	Invoice details			Shipping bill/		Integrated Tax		Cess	Integrated	Integrated	Net
recipient				Bill of export/					tax and cess	tax and	Integrated
				Endorsed					involved in	cess	tax and
					e by SEZ				debit note, if		cess
	No.	Date	Value	No.	Date	Taxable	Amt.		any	in credit	(8+9+10-
						Value				note, if	11)
										any	
1	2	3	4	5	6	7	8	9	10	11	12
											,,



# <sup>5</sup>Statement 4A Refund by SEZ on account of supplies received from DTA – With payment of tax

GSTIN of Supplier	Document Details					Shipping bill/ Bill of export/ Endorsed invoice by SEZ		Integrated Tax	Cess
	Type of Document	No.	Date	Value	No.	Date			
1	2	3	4	5	6	7	8	9	10

<sup>5.</sup> Statement 4A has been inserted by notification No.1878-F.T. dated 22.11.2019 w. e. f. 14.11.2019

# <sup>6</sup>Statement 5 [rule 89(2)(d) and rule 89(2)(e)] Refund Type: On account of supplies made to SEZ unit or SEZ Developer (without payment of tax)

Sr. No.		Document	Details	Goods/ Services (G/S)	Shipping bill/ Bill of export/ Endorsed invoice no.		
	Type of Document	No.	Date	Value		No.	Date
1	2	3	4	5	6	7	8

<sup>6.</sup> Statement 5 has been substituted by notification No.1878-F.T. dated 22.11.2019 w. e. f. 14.11.2019 for the following:-

## "Statement-5 [rule 89(2)(d) and 89(2)(e)]

Refund Type: On account of supplies made to SEZ unit or SEZ Developer (without payment of tax) (Amount in Rs.)

Sl. No.		Invoice details		Goods/ Services (G/S)	Shipping bill/Bill of invoice	•
	No.	Date	Value		No.	Date
1	2	3	4	5	6	7



## Statement-5A [rule 89(4)]

Refund Type: On account of supplies made to SEZ unit / SEZ developer without payment of tax (accumulated ITC) – calculation of refund amount

## (Amount in Rs.)

Turnover of zero rated supply of goods and services	Net input tax credit	Adjusted total turnover	Refund amount (1×2÷3)
1	2	3	4

# <sup>7</sup>[Statement 5B [rule 89(2)(g)] Refund Type: On account of deemed exports claimed by supplier

Sl. No.	Document de in case refun		• •	Tax paid				
	Type of Document	No.	Date	Taxable Value	Integrated Tax	Central Tax	State/Union Territory Tax	Cess
1	2	3	4	5	6	7	8	9

# Statement 5B [rule 89(2)(g)] Refund Type: On account of deemed exports claimed by recipient

Sl. No.		Document details of inward supplies in case refund is claimed by recipient				Tax paid			
	GSTIN of Supplier	Type of Document	No.	Date	Taxable Value	Integrated Tax	Central Tax	State/Union Territory Tax	Cess
1	2	3	4	5	6	7	8	9	10
									]

# "Statement 5B [rule 89(2)(g)]

Refund Type: On account of deemed exports

(Amount in Rs)

SERVING GST	K. AGRAMAI MONANA	
07	ACTITIONERS TOTAL	

Sl. No.	supplies in	case refi	und is cla	n case refund	s of outward lier/Details of is claimed by		Tax <sub>i</sub>	paid	
	GSTIN of the supplier	No.	Date	Taxable Value	Type (Invoice/ Credit Note/ Debit Note)	Integrated Tax	Central Tax	State Tax /Union territory Tax	Cess
1	2	3	4	5	6	7	8	9	10

## <sup>9</sup>UNDERTAKING

I hereby undertake to deposit to the Government the amount of refund sanctioned along with interest in case of non-receipt of foreign exchange remittances as per the proviso to section 16 of the IGST Act, 2017 read with rule 96B of the CGST Rules 2017.

Name –

Designation / Status

# $^8Statement\ 6\ [rule\ 89(2)(j)]$ Refund Type: On account of change in POS (inter-state to intra-state and vice versa)

Document Type B2C/Registered	Recipient GSTIN/UIN	Name (in	Document Details				
		of B2C)	Type of Document	No.	Date	Value	Taxable Value
1	2	3	4	5	6	7	8

Details of documents covering transaction considered as intra -State / inter-State transaction earlier

<sup>9.</sup> The undertaking has been inserted by Notification No.443-F.T. dated 03.04.2020 w.e.f. 23.03.2020.



Inter/Intra	Integrated Tax	Central tax	State/UT Tax	Cess	PoS
9	10	11	12	13	14

Transaction which were held inter State / intra-State supply subsequently							
Inter/Intra	Integrated Tax	Central tax	State/UT Tax	Cess	PoS		
15	16	17	18	19	20		

<sup>8.</sup> Statement 6 has been substituted by notification No.1878-F.T. dated 22.11.2019 w. e. f. 14.11.2019 for the following:-

## *"Statement-6 [rule 89(2)(j)]*

Refund Type: On account of change in POS of the supplies (inter-State to intra-State and vice versa) Order Details (issued in pursuance of sections 77 (1) and (2), if any: Order No: Order Date:

(Amount in Rs.)

Recipient's  GSTIN/ UIN  Name		Inve	oice de	tails	Details of tax paid on transaction considered as intra-State / inter-State transaction earlier					Transaction which were held inter State / intra-State supply subsequently				
(in case					Integrated	Central	State/	Cess	Place of	Integrated	Central	State/	Cess	Place of
B2C)					tax	tax	UT tax		Supply	tax	tax	UT		Supply
	No.	Date	Value	Taxable								tax		
				Value										
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
														"

## Statement-7 [rule 89(2)(k)]

Refund Type: Excess payment of tax, if any in case of last return filed.

(Amount in Rs.)

Tax period	ARN of return	Date of filing return		Tax Payal	ole	
	Teturn	return	Integrated tax	Central tax	State/ UT tax	Cess
					C I turi	
1	2	3	4	5	6	7

Annexure-2 Certificate [rule 89(2)(m)]

This is to certify that in respect of the refund amounting to Rs.<>> (in words) claimed by New Market (Applicant's Name) GSTIN/ Temporary ID for the tax period <>, the incidence of the refund amounting to Rs.<
(Applicant's Name) GSTIN/ Temporary ID for the tax period <>, the incidence o
and interest, has not been passed on to any other person. This certificate is based on the examination of the
books of account and other relevant records and returns particulars maintained/ furnished by the applicant.

Signature of the Chartered Accountant/ Cost Accountant:

Name:

Membership Number:

Place:

Date:

Note - This Certificate is not required to be furnished by the applicant, claiming refund under clause (a) or clause (b) or clause (c) or clause (d) or clause (f) of sub-section (8) of section 54 of the Act.

#### Instructions -

1. Terms used:

a. B to C: From registered person to unregistered person

b. EGM: Export General Manifest

c. GSTIN: Goods and Services Tax Identification Number

d. IGST: Integrated goods and services tax

e. ITC: Input tax credit

f. POS: Place of Supply (Respective State)

g. SEZ: Special Economic Zone

h. Temporary ID: Temporary Identification Number

i. UIN: Unique Identity Number

- 2. Refund of excess amount available in electronic cash ledger can also be claimed through return or by filing application.
- 3. Debit entry shall be made in electronic credit or cash ledger at the time of filing the application.
- 4. Acknowledgement in Form **GST RFD-02** will be issued if the application is found complete in all respects.
- 5. Claim of refund on export of goods with payment of IGST shall not be processed through this application.
- 6. Bank account details should be as per registration data. Any change in bank details shall first be amended in registration particulars before quoting in the application.
- 7. Declaration shall be filed in cases wherever required.
- 8. 'Net input tax credit' means input tax credit availed on inputs during the relevant period for the purpose of Statement-1 and will include ITC on input services also for the purpose of Statement-3A and 5A.
- 9. 'Adjusted total turnover' means the turnover in a State or a Union territory, as defined under clause (112) of section 2 excluding the value of exempt supplies other than zero-rated supplies, during the relevant period.
- 10. For the purpose of Statement-1, refund claim will be based on supplies reported in GSTR-1 and GSTR-2.

- 11. BRC or FIRC details will be mandatory where refund is claimed against export of services details of shippi
- bill and EGM will be mandatory to be provided in case of export of goods. 12. Where the invoice details are amended (including export), refund shall be allowed as per the calculation based
- 13. Details of export made without payment of tax shall be reported in Statement-3.
- 14. Availability of refund to be claimed in case of supplies made to SEZ unit or SEZ developer without payment of tax shall be worked out in accordance with the formula prescribed in rule 89(4).
- 15. 'Turnover of zero rated supply of goods and services' shall have the same meaning as defined in rule 89(4).

on amended value.

<sup>\*</sup>FORM GST RFD-01 has been substituted by Notification No. 1893-F.T. dated 31.12.2018 w.e.f. 31.12.2018.

<sup>\$</sup>Subs. by Notification No. 173-F.T. dated 29.01.2019 w. e. f. 01.02.2019.



# **#FORM-GST-RFD-01 A**

[See rules 89(1) and 97A]

# Application for Refund (Manual)

(Applicable for casual taxable person or non-resident taxable person, tax deductor, tax collector and other registered taxable person)

1.	GSTIN /								
	Temporary ID								
2.	Legal Name								
3.	Trade Name, if								
	any								
4.	Address								
5.	Tax period (if applicable)	From ·	<year><n< td=""><td>Month&gt;</td><td>To &lt;</td><td>Year&gt;<montl< td=""><td>n&gt;</td><td></td><td></td></montl<></td></n<></year>	Month>	To <	Year> <montl< td=""><td>n&gt;</td><td></td><td></td></montl<>	n>		
6.	Amount of	1	Act	Tax	Interest	Penalty	Fees	Others	Total
	Refund								
	Claimed(Rs.)	Centra	ıl tax						
		State /	UT tax						
		Integra	ated tax						
		Cess							
		Total							
7.	Grounds of	(a)	Excess t	alance in E	Electronic Cas	h Ledger			
	Refund Claim	(b)	Exports	of services	- with paymen	t of tax			
	(select from drop	(c)	Exports	of goods / s	services- with	out payment o	of tax (accur	nulated ITC)	
	down)	(d)	ITC acci	umulated d	ue to inverted	tax structure[	under clause	e (ii) of first p	proviso to
			section 5	54(3)]					
		(e)	On acco	unt of supp	olies made to S	SEZ unit/ SEZ	developer (	with paymen	t of tax)
		(f)	On acco tax)	unt of supp	lies made to S	SEZ unit/ SEZ	developer (	without payr	nent of
		(g)	Recipier	nt of deeme	d export supp	lies/Supplier o	of deemed e	xport supplie	es

(h)	On acco	ount of order				
	Sl. No.	Type of order	Order No.	Order date	Order Issuing Authority	Payment reference No., if any
	(i)	Assessment				
	(ii)	Finalization of Provisional assessment				
	(iii)	Appeal				
	(iv)	Any other order (specify)				
	_	d on intra-State supe versa (change of l		ich is subs	equently held to b	e inter-State supp
(j) l	Excess p	payment of tax, if a	ny			
(k)	Any oth	er (specify)				

## **DECLARATION** [second proviso to section 54(3)]

I hereby declare that the goods exported are not subject to any export duty. I also declare that I have not availed any drawback of central excise/service tax/central tax on goods or services or both and that I have not claimed refund of the integrated tax paid on supplies in respect of which refund is claimed.

Signature

Name -

Designation / Status

## **DECLARATION** [section 54(3)(ii)]

I hereby declare that the refund of ITC claimed in the application does not include ITC availed on goods or services used for making 'nil' rated or fully exempt supplies.

Signature

Name -

Designation / Status

## \*DECLARATION [rule 89(2)(f)]

I hereby declare that tax has not been collected from the Special Economic Zone unit /the Special Economic Zone developer in respect of supply of goods or services or both covered under this refund claim.

Signature

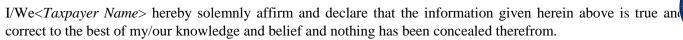
Name –

Designation / Status



DECLARATION [rule 89(2)(g)]
(For recipient/supplier of deemed export)
In case of refund claimed by recipient
I hereby declare that the refund has been claimed only for those invoices which have been detailed in statement 5B for the tax period for which refund is being claimed and the amount does not exceed the amount of input tax credit availed in the valid return filed for the said tax period. I also declare that the supplier has not claimed refund with respect to the said supplies.
In case of refund claimed by supplier
I hereby declare that the refund has been claimed only for those invoices which have been detailed in statement 5B for the tax period for which refund is being claimed and the recipient has not claimed refund with respect to the said supplies and also the recipient has not availed any input tax credit on such supplies.
Signature
Name – Designation / Status
<u>UNDERTAKING</u>
I hereby undertake to pay back to the Government the amount of refund sanctioned along with interest in case it is found subsequently that the requirements of clause (c) of sub-section (2) of section 16 read with sub-section (2) of section 42 of the CGST/SGST Act have not been complied with in respect of the amount refunded.
Signature
Name –
Designation / Status
I/We (Applicant) having GSTIN/ temporary Id, solemnly affirm and certify that in respect of the refund amounting to Rs with respect to the tax, interest, or any other amount for the period fromto, claimed in the refund application, the incidence of such tax and interest has not been passed on to any other person.  Signature  Name –
Designation / Status
(This Declaration is not required to be furnished by applicants who are claiming refund under clause (a) or clause (b) or clause (c) or clause (d) or clause (f) of sub-section (8) of section 54.)

# 8. Verification



I/We declare that no refund on this account has been received by me/us earlier.

Place Signature of Authorised Signatory
Date (Name)
Designation/ Status

### **Annexure-1**

## **Statement -1 [rule 89(5)]**

Refund Type: ITC accumulated due to inverted tax structure [clause (ii) of first proviso to section 54(3)]

### (Amount in Rs.)

Turnover of inverted	Tax payable on such	Adjusted total	Net input tax	Maximum refund amount to be
rated supply of	inverted rated supply	turnover	credit	claimed
goods and services	of goods and services			$[(1\times4\div3)-2]$
1	2	3	4	5

## Statement 1A [rule 89(2)(h)]

Refund Type: ITC accumulated due to inverted tax structure [clause (ii) of first proviso to section 54(3)]

S1.	Details of	invo	ices of	inward	Tax paid	Tax paid on inward supplies of				s of invoic	es of	Tax paid on outward		
No	supplies	of in	outs rec	ceived		inputs			utward	supplies	issued	supplies		
	GSTIN	No	Date	Taxable	Integrated	Central	State Tax /	No.	Date	Taxable	Invoice	Integrated	Central	State
	of the			Value	Tax	Tax	Union			Value	type	Tax	Tax	/Union
	Supplier*						territory				(B2B/			territory
							Tax				B2C)			Tax
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

<sup>\*</sup>In case of imports or supplies received under reverse charge mechanism [sub-section (3) of section 9 of CGST/SGST Act or sub-section (3) of section 5 of IGST Act], the GSTIN of supplier will mean GSTIN of applicant (recipient).

#### **Statement- 2 [rule 89(2)(c)]**

Refund Type: Exports of services with payment of tax

(Amount in Rs.)

S1. No.	I	nvoice	details	Integrate	ed tax	Cess	BRC/	FIRC	Integrated tax and cess involved in debit note, if any	Integrated tax and cess involved in credit note, if any	Net Integrated tax and cess (6+7+10 - 11)
	No.	Date	Value	Taxable value	Amt.	Amt.	No.	Date	Amt.	Amt.	Amt.
1	2	3	4	5	6	7	8	9	10	11	12



## Statement- 3 [rule 89(2)(b) and 89(2)(c)]

Refund Type: Export without payment of tax (accumulated ITC)

(Amount in Rs.)

S1.		Invoice deta	ils	Goods/ Services	Shipping bil	l/ Bill of	export	EGM I	Details	BRC/	FIRC
	No.	Date	Value	(G/S)	Port code	No.	Date	Ref No.	Date	No.	Date
1	2	3	4	5	6	7	8	9	10	11	12

## Statement- 3A [rule 89(4)]

Refund Type: Export without payment of tax (accumulated ITC) – calculation of refund amount

(Amount in Rs.)

			(1 mile mile m
Turnover of zero rated supply	Net input tax credit	Adjusted total	Refund amount
of goods and services		turnover	(1×2÷3)
1	2	3	4

## Statement-4 [rule 89(2)(d) and 89(2)(e)]

Refund Type: On account of supplies made to SEZ unit or SEZ Developer (on payment of tax)

(Amount in Rs.)

GSTIN of recipient	In	Invoice details			pping Bill of bort/ orsed ice by EZ	Integrated Tax		Cess	Integrated tax and cess involved in debit note, if any	Integrated tax and cess involved in credit note, if any	Net Integrated tax and cess (8+9+10- 11)
	No.	Date	Value	No.	Date	Taxable Value	Amt.				
1	2	3	4	5	6	7	8	9	10	11	12

## Statement-5A [rule 89(4)]

Refund Type: On account of supplies made to SEZ unit / SEZ developer without payment of tax (accumulated ITC) – calculation of refund amount

(Amount in Rs.)

Turnover of zero rated supply of	Net input tax credit	Adjusted total	Refund amount
goods and services		turnover	(1×2÷3)

1	2	3	4
			<sup>7</sup> ACTITIONERES

## **\*Statement 5B** [rule 89(2)(g)]

Refund Type: On account of deemed exports

(Amount in Rs)

Sl. No.	of our	tward by su	supplie pplier/I	edit notes/ es in case r Details of i ase refund		Tax	paid		
	GSTIN of the supplier	No.	Date	Taxable Value	Type (Invoice/ Credit Note/ Debit Note)	Integrated Tax	Central Tax	State Tax /Union territory Tax	Cess
1	2	3	4	5	6	7	8	9	10

# Statement-6 [rule 89(2)(j)]

Refund Type: On account of change in POS of the supplies (inter-State to intra-State and vice versa)

Order Details (issued in pursuance of sections 77 (1) and (2), if any: Order No: Order Date:

(Amount in Rs.)

Recipient's  GSTIN/ UIN  Name		Inv	oice de	tails	Details of ta as intra-Stat	-					n which v State supp			
(in case B2C)	No	Date	Value	Taxable	Integrated tax	Central tax	State/ UT tax		Place of Supply	Integrated tax	Central tax	State/ UT tax		Place of Supply
	110.	Dute	varac	Value										
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
			·											

## Statement-7 [rule 89(2)(k)]

Refund Type: Excess payment of tax, if any in case of last return filed.

# (Amount in Rs.)



Tax period	ARN of	Date of filing	Tax Payable								
	return	return	Integrated tax	Central tax	State/ UT tax	Cess					
1	2	3	4	5	6	7					

<sup>\*</sup>FORM GST RFD-01A has been substituted by Notification No. 1893-F.T. dated 31.12.2018 w.e.f. 31.12.2018. \$Subs. by Notification No. 173-F.T. dated 29.01.2019 w. e. f. 01.02.2019.

<sup>\*</sup> Substituted by Notification No. 1125-F.T. dated 19.07.2019 w.e.f.19.07.2019.





[See rules 91(2), 92(1), 92(3), 92(4), 92(5) and 97A]

# **Refund Order details**

1.	ARN	
2.	GSTIN / Temporary ID	
3.	Legal Name	
4.	Filing Date	
5.	Reason of Refund	
6.	Financial Year	
7.	Month	
8.	Order No.:	
9.	Order issuance Date:	
10.	Payment Advice No.:	
11.	Payment Advice Date:	
12.	Refund Issued To:	Drop down: Taxpayer / Consumer Welfare Fund
13.	Issued by:	
14.	Remarks:	
15.	Type of Order	Drop Down: RFD- 04/ 06/ 07 (Part A)
16.	Details of Refund Amou	ant (As per the manually issued Order):

Description		Integrated Tax					C	entra	al Ta	ιX		State/ UT tax					Cess							
	Tax	Interest	Penalty	Fees	Others	Total	Tax	Interest	Penalty	Fees	Others	Total	Tax	Interest	Penalty	Fees	Others	Total	Tax	Interest	Penalty	Fees	Others	Total
a. Refund amount claimed																								
b.Refund Sanctioned on provisional basis																								
c. Remaining Amount																								
d. Refund amount in- admissible																								
e. Gross amount to be paid																								

			1	1	1	1	1	1	1	1	1	1	1		1	1	1	1		1	SERV	
f. Interest (if any)																					NG OST S	ACTITIONERS
g. Amount adjusted against outstanding demand under the existing law or under the Act																						
h. Net amount to be paid																						
17.	Attachments (Orders)					RFD-04; RFD- 06; RFD 07 (Part A)							rt				•					
Date:							Sig	natu	re (I	OSC	:):											
Place:							Name:															
										De	signa	ation	1:									
										Of	fice A	Addı	ess:									

<sup>#</sup> Inserted by Notification No. 2031-F.T. dated 15.11.2017 w. e. f. 15.11.2017.

# <sup>®</sup>FORM GST RFD-01 W



[Refer Rule 90(5)]

# Application for Withdrawal of Refund Application

1. ARN:

2.	GSTIN:
3.	Name of Business (Legal):
4.	Trade Name, if any:
5.	Tax Period:
6.	Amount of Refund Claimed:
7.	Grounds for Withdrawing Refund Claim:
i	. Filed the refund application by mistake
ii	. Filed Refund Application under wrong category
iii	. Wrong details mentioned in the refund application
iv	Cothers (Please Specify)
8.	Declaration: I/We <taxpayer name=""> hereby solemnly affirm and declare that the information given</taxpayer>
her	rein is true and correct to the best of my/ our knowledge and belief and nothing has been concealed
the	refrom.
Pla	sce: Signature of Authorised Signatory
Da	te: Name
	Designation/ Status".



[See rules 90(1), 90(2) and 95(2)]

## Acknowledgment

Your application for ref	fund is h	ereby acknow	ledged against	<application< th=""><th>ion Referenc</th><th>e Number&gt;</th></application<>	ion Referenc	e Number>			
Acknowledgement Nur	nber		:						
Date of Acknowledgem	nent		:						
GSTIN/ UIN/ Tempora	ry ID, if	applicable	:						
Applicant's Name			:						
Form No.			:						
Form Description			:						
Jurisdiction (tick appro-	priate)		:						
Centre State/ Union Territory:									
Filed by		:							
		Refund App	olication Details						
Tax Period									
Date and Time of Filing	g								
Reason for Refund									
Amount of Refund Clai	med:								
	Tax	Interest	Penalty	Fees	Others	Total			

	Tax	Interest	Penalty	Fees	Others	Total
Central Tax						
State /UT tax						
Integrated Tax						
Cess						
Total						

Note 1: The status of the application can be viewed by entering ARN through < Refund> Track Application Status" on the GST System Portal.

Note 2: It is a system generated acknowledgement and does not require any signature.

<sup>\*</sup>FORM GST RFD-02 has been substituted by Notification No. 1221-F.T. dated 06.07.2017 w.e.f. 01.07.2017.



[See Rule 90(3)]

# **Deficiency Memo**

Reference	ce No. :	Date: <dd mm="" yyyy=""></dd>	
To			
	(GSTIN/ UIN/ Temporary ID)		
	(Name)		
	(Address)		
Subject:	Refund Application Reference No. (ARN)	.DatedReg.	
Sir/Mada	am,		
This has	reference to your above mentioned application file	d under section 54 of the Act. Upon scrutiny of you	ır
applicati	on, certain deficiencies have been noticed below:		
Sr No	Description( select the reason from the drop down	of the Refund application)	
1.	<multi option="" select=""></multi>		
2.			
	Other <text box="">{ any other reason other</text>	than the reason select from the 'reason	
	master'}		
You are	advised to file a fresh refund application after rectifi	cation of above deficiencies.	
Date:		Signature (DSC):	
Place:		Name of Proper Officer:	
		Designation:	
		Office Address:	



6	.K. AGRA	4
9		TE.
SERVING		K.com
8		To A
2	PACTITIONER	

Sanction Order No:	Date: <dd mm="" yyyy=""></dd>
То	
(GSTIN)	
(Name)	
(Address)	
Provisiona	al Refund Order
Refund Application Reference No. (ARN)	
Acknowledgement NoDated<	J/IVIIVI/YYYY>
Sir/Madam,	

With reference to your above mentioned application for refund, the following amount is sanctioned to you on a provisional basis:

Sr.	Description	Central	State	Integrated	Cess
No	_	Tax	/UT tax	Tax	
i.	Amount of refund claimed				
ii.	10% of the amount claimed as refund  (to be sanctioned				
	later)				
iii.	Balance amount (i-ii)				
iv.	Amount of refund sanctioned				
	Bank Details				
v.	Bank Account No. as per application				
vi.	Name of the Bank				
vii.	Address of the Bank /Branch				
viii.	IFSC				
ix.	MICR				



Date:	Signature (DSC):
Place:	Name:
	Designation:
	Office Address:

<sup>\*</sup>FORM GST RFD-04 has been substituted by Notification No. 1221-F.T. dated 06.07.2017 w.e.f. 01.07.2017.



[See rule 91(3), 92(4), 92(5) & 94]

# Payment \*[order]

Payment *[order] No: -	Date: <dd mm="" yyyy=""></dd>
<sup>®</sup> [To PAO, CBIC] To <centre> PAO/ Treasury/ RBI/ Bank</centre>	
Refund Sanction Order No	
Order Date <dd mm="" yyyy=""></dd>	
GSTIN/ UIN/ Temporary ID <>	
Name: <>	
Refund Amount (as per Order):	

Description		I	nteg	grate	ed T	'ax		Central Tax				State/ UT tax						Cess						
	Т	I	P	F	О	Total	Т	I	P	F	О	Total	Т	Ι	P	F	О	Total	Т	I	P	F	О	Total
Net																								
Refund																								
amount																								
sanctioned																								
Interest																								
on																								
delayed																								
Refund																								
Total																								

Note – 'T' stands Tax; 'I' stands for Interest; 'P' stands for Penalty; 'F' stands for Fee and 'O' stands for Others

	Details of the Bank	
i.	Bank Account no as per application	



ii.	Name of the Bank	
iii.	Name and Address of the Bank /branch	
iv.	IFSC	
v.	MICR	

(DSC):
n:
dress:

<sup>\*\*</sup> FORM GST RFD-05 has been substituted by Notification No. 1221-F.T. dated 06.07.2017 w.e.f. 01.07.2017.

<sup>\*</sup> Substituted by Notification No.1090-F.T. dated 28 .06.2019 for "Advice" w. e. f. 24.09.2019 (vide Notification No. 1692-F.T. dated 30.09.2019.)

<sup>&</sup>lt;sup>®</sup> Substituted by Notification No.1090-F.T. dated 28.06.2019 for "To <Centre> PAO/ Treasury/ RBI/ Bank" w. e. f. 24.09.2019 vide Notification No. 1692-F.T. dated 30.09.2019.

[See rule 92(1), 92(3), 92(4), 92(5) & 96(7)]

Order No.:		Date: <dd mm="" yyyy=""></dd>	>				
To							
(GSTIN/ UIN/ Tempo	orary ID)						
(Name)							
(Address)							
Show cause notice No. (If applicable	e)						
Acknowledgement No		Dated <dd mn<="" td=""><td>I/YYYY&gt;</td><td></td></dd>	I/YYYY>				
	Refund S	Sanction/Rejection Order					
Sir/Madam,							
This has reference to your above me	ntioned application for refund t	filed under section 54 of the Act	*/ interest on refund*.				
<< reasons, if any, for	granting or rejecting refund >>	>					
Upon examination of your application, the amount of refund sanctioned to you, after adjustment of dues (where applicable) is as follows:							
*Strike out whichever is not applicate	ble						
Description	Integrated Tax	Central Tax	State/ UT tax	Cess			

T

O Total

F O Total T

F O Total T I P F

O Total

1. Amount of refund/interest*												
claimed												
2. Refund sanctioned on												
provisional basis (Order												
Nodate) (if applicable)												
3. Refund amount inadmissible												
< <reason dropdown="">&gt;</reason>												
<multiple be<="" reasons="" td="" to=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></multiple>												
allowed>												
4. Gross amount to be paid (1-2-												
3)												
5. Amount adjusted against												
outstanding demand (if any)												
under the existing law or under												
the Act.												
Demand Order No												
date, Act/Act Period												
<multiple add<="" possible-="" rows="" td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></multiple>												
row to be given>												
6. Net amount to be paid												

Note - 'T' stands Tax; 'I' stands for Interest; 'P' stands for Penalty; 'F' stands for Fee and 'O' stands for Others

<sup>\*</sup>Strike out whichever is not applicable

 $<sup>^{\&</sup>amp;}$ 1. I hereby sanction an amount of INR \_\_\_\_\_ to M/s \_\_\_\_having GSTIN \_\_\_under sub-section (5) of section 54) of the Act /under section 56 of the Act  $^{@}$ 

"Strike out whichever is not applicable									
(a) <sup>#</sup> and the amount is to be paid to the bank account specified by him in his application;									
(b) the amount is to be adjusted towards recovery of arrears as specified at serial number 5 of the Table above;									
(c) an amount ofrupees is to be adjusted towards recovery of arrears amount ofrupees is to be paid to the bank account specified by him is *Strike-out whichever is not applicable.									
Or &2. I hereby credit an amount of INR to Consumer Welfare Fund un	der sub-section () of Section () of the Act								
&3. I hereby reject an amount of INRto M/shaving GSTIN _ & Strike-out whichever is not applicable	under sub-section () of Section () of the Act.								
Date:  Place:  Signature (Designation: Office Addre									

<sup>\*</sup>FORM GST RFD-06 has been substituted by Notification No. 1221-F.T. dated 06.07.2017 w.e.f. 01.07.2017.

# <sup>®</sup>FORM GST RFD-07



[See rules 92(2) & 96(6)]

Reference No.	Date: <dd mm="" yyyy=""></dd>
То	
(GSTIN/UIN/Temp. ID)	
(Name)	
(Address)	
(ARN)	

## Part-A

## Order for withholding the refund

Refund payable to the taxpayer with respect to ARN specified above are hereby withheld in accordance with the provisions of sub-section (10)/ (11) of section 54 of the CGST Act, 2017. The reasons for withholding are given as under:

S. No.	Particulars									
1	ARN									
2	Amount Claimed in RFD-01	<auto-populated></auto-populated>								
3	Amount Inadmissible in RFD-06	<auto-populated></auto-populated>								
4	Amount Adjusted in RFD-06	<auto-populated></auto-populated>								
5	Amount Withheld									
6	Reasons for withholding (More than one reason can be selected)	<ul> <li>Recoverable dues not paid</li> <li>In view of sub-section 11 of</li> <li>Section 54</li> <li>On account of fraud (s) of serious</li> </ul>								
U	_ `									

S. K. AGRAWA
2
ON ANACTITIONERS TO
ACMIONERS.

		o Others, (specify)
7	Description of the reasons	(Up to 500 characters, separate file can be attached for detailed reasons)
8	Record of Personal Hearing	(Up to 500 characters, separate file can be attached for detailed records)

### Part-B

## Order for release of withheld refund

This has reference to your refund application <ARN> dated <date> against which the payment of refund amount sanctioned vide order <RFD-06 order no> dated <date> was withheld by this office order <Order Reference No> dated <date>. It has been now found to my satisfaction that the conditions for withholding of refund no longer exist and therefore, the refund amount withheld is hereby allowed to be released as given under:

S. No.	Particulars						
1	ARN						
2	Amount Claimed in RFD-01	<auto-populated></auto-populated>					
3	Amount Inadmissible in RFD-06	<auto-populated></auto-populated>					
4	Amount Adjusted in RFD-06	<auto-populated></auto-populated>					
5	Amount Withheld in RFD-07 A	<auto-populated></auto-populated>					
6	Amount Released						

Date:	Signature (DSC):
Place:	Name:
	Designation:
Office Address:	

7

Amount to be Paid

<sup>&</sup>lt;sup>®</sup> Substituted by Notification No. 609-F.T. dated 03.06.2021 w.e.f. 18.05.2021.





# Notice for rejection of application for refund

SCN N	o.:	Date: <dd mm="" yyyy=""></dd>
To		
	(GSTIN/ UIN/ Temporary ID)	
	(Name)	
	(Address)	
ACKN	OWLEDGEMENT No	
ARN.	Dated<	D/MM/YYYY>
This ha	as reference to your above mentioned application for refund, f	filed under section 54 of the Act. On examination, it
appears	s that refund application is liable to be rejected on account of	the following reasons:
Sr No	Description (select the reasons of inadmissibility of refund from the drop down)	Amount Inadmissible
i.		
ii		
iii	Other{ any other reason other than the reasons mentioned in 'reason master'}	
should ☐You ☐ You ☐ You If you	e hereby called upon to show cause as to why your refund on to be rejected for reasons stated above.  are hereby directed to furnish a reply to this notice within fift are also directed to appear before the undersigned on DD/MI fail to furnish a reply within the stipulated date or fail to appear ease will be decided ex parte on the basis of available reco	een days from the date of service of this notice. M/YYYY at HH/MM. bear for personal hearing on the appointed date and
Date: Place:		Signature (DSC): Name: Designation: Office Address:

[See Rule 92(3)]



## Reply to show cause notice

Date: <DD/MM/YYYY>

1.	Reference No. of		Date of issue	
1.	Notice		Bute of Issue	
2.	GSTIN / UIN			
3.	Name of business (Legal)			
4.	Trade name, if any			
5.	Reply to the notice			
6.	List of documents uploaded			
7.	Verification			
	Iinformation given hereina been concealed therefrom	above is true and		ereby solemnly affirm and declare that the est of my knowledge and belief and nothing has
				Signature of Authorised Signatory
				Name
				Designation/Status
	Place			
	Date DD/MM/YYYY	<i>Y</i>		
			<b>a</b> :	turns of Authorized Signatory

Place Signature of Authorised Signatory

Date (Name)

Designation/ Status

# **#FORM GST RFD-10**



[See rule 95(1)]

# Application for Refund by any specialised agency of UN or any Multilateral Financial Institution and Organization, Consulate or Embassy of foreign countries, etc.

1. UII	N :				
2. Naı	me :				
3. Add	dress:				
4. Tax	x Period (Qua	arter) : From <dd< th=""><th>/MM/YY&gt; To</th><th><dd mm="" yy=""></dd></th><th></th></dd<>	/MM/YY> To	<dd mm="" yy=""></dd>	
5. AR	N and date o	f GSTR 11: ARN<	> Dat	te <dd mm="" yy=""></dd>	
6. Am	ount of Refu	nd Claim	: <	INR> <in words=""></in>	
	State	Central Tax	State /UT Tax	Integrated Tax	Cess
Tot	al				
7. Det	<ul><li>b. Bank Ac</li><li>c. Name of</li><li>d. Name of</li></ul>	count Number count Type	r/Operator		
I _ here bes Tha Inst	eby solemnly t of my know at we are el titution and (	affirm and declare ledge and belief and igible to claim su	that the information d nothing has been of the refund as special that or Embassy of	n given herein above concealed therefrom. Ified agency of UN	national organization >> is true and correct to the O/Multilateral Financial ny other person/ class of
	Pate: lace: n / Status		Signature o Nai	of Authorised Signatone:	ory:



## Instructions

- 1. Application for refund shall be filed on quarterly basis.
- 2. Table No. 6 will be auto-populated from details furnished in table 3 of GSTR-11.
- 3. There will be facility to edit the refund amount as per eligibility.
- 4. Requisite certificate issued by MEA granting the facility of refund shall be produced before the proper officer for processing refund claim.

<sup>\*</sup>FORM GST RFD-10 has been substituted by Notification No. 2313-F.T. dated 29.12.2017.



# **#FORM GST RFD-10 B**

[See rule 95A]

## Application for refund by Duty Free Shops/Duty Paid Shops (Retail outlets)

1. GSTIN:

Bank Account Number

ii.Bank Account Type

iii.Name of the Bank

2. Name:														
3. Addres	ss:													
4. Tax Pe	riod (N	Ionthly	//Quar	terly):	From	<dd mi<="" td=""><td>M/YY&gt;To &lt;</td><td>DD/MM</td><td>I/YY&gt;</td><td></td><td></td><td></td><td></td><td></td></dd>	M/YY>To <	DD/MM	I/YY>					
5. Amour	nt of Re	efund C	Claim:	<inr></inr>	<in td="" w<=""><td>ords&gt;</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></in>	ords>								
6. Details	of inw	ard su	pplies	of good	ls recei	ved and	correspondi	ng outw	ard sup	plies:				
						DETAI	LS OF SUP	PLIES						
				In	ward S	Supplies					Corr	_	ding (	outward
GSTI	Invoice details			ls	Rat Ta	Taxabl	A	Amount of tax			Invoice details			
N of suppli er	No / Date	HS N Cod e	Qty	Valu e	е	e value	Integrate d Tax	Centr al Tax	Stat e /UT Tax	Ces s	No. / Dat e	HS N Cod e	Qty	Taxabl e Value
7. Refund	l applie	d for:					- <b>L</b>							L
Central Tax State/UT Tax		Integ	Integrated Tax		Cess		Tota	l						
<total></total>	of Bank		otal>			<tota< td=""><td colspan="3"><total> <total></total></total></td><td><tot< td=""><td colspan="3"><total></total></td></tot<></td></tota<>	<total> <total></total></total>			<tot< td=""><td colspan="3"><total></total></td></tot<>	<total></total>			

iv. Name of the Account Holder/Operator v. Address of Bank Branch vi.IFSC vii.MICR Declaration: I \_\_\_\_\_ as an authorized representative of \_\_\_\_\_ (Name of Duty Free Shop/Duty Paid Shop – retail outlet) hereby solemnly affirm and declare that,-(i) refund has not been claimed against any of the invoices in respect of outward supplies submitted with this application. (ii) the information given herein above is true and correct to the best of my knowledge and belief. Date: Signature of Authorized Signatory:

#### **Instructions:**

Place:

9.

1. Application for refund shall be filed on monthly/quarterly basis depending upon the frequency of furnishing of return by retail outlets.

Designation / Status

Name:

- 2. Application shall be made in respect of one inward supply invoice only once. Therefore, it is advised that refund shall be applied only for those inward supply invoices the goods received against which have been completely supplied.
- 3. Applicant should ensure that all the invoices declared by him have the GSTIN of the supplier and the GSTIN of the respective Duty Free Shop /Duty Paid Shop (retail outlet) clearly marked on them.
- 4. Documents to be attached with the refund application:
  - a) Undertaking that all indigenous goods on which refund is being claimed have been received by the Duty-Free Shop/Duty Paid Shop (retail outlet);
  - b) Undertaking that the indigenous goods have been sold to eligible outgoing international tourist;
  - c) Copy of the returns for the period for which application is being filed."

<sup>&</sup>lt;sup>#</sup> Inserted by Notification No.1090-F.T. dated 28 .06.2019 w. e. f. 01.07.2019.



## **#FORM GST RFD-11**

[See rule 96A]

## Furnishing of bond or Letter of Undertaking for export of goods or services

1. GSTI	N			
2. Name				
3. Indica	te the type of document furnished	Bond:	Letter of Und	ertaking
4. Detail	s of bond furnished			
Sr. No.	Reference no. of the bank guarantee	Date	Amount	Name of bank and branch
1	2	3	4	5

Note – Hard copy of the bank guarantee and bond shall be furnished to the jurisdictional officer.

#### 5. Declaration -

- (i) The above-mentioned bank guarantee is submitted to secure the integrated tax payable on export of goods or services.
- (ii) I undertake to renew the bank guarantee well before its expiry. In case I/We fail to do so the department will be at liberty to get the payment from the bank against the bank guarantee.
- (iii) The department will be at liberty to invoke the bank guarantee provided by us to cover the amount of integrated tax payable in respect of export of goods or services.

Signature of Authorized Signatory

Name	
Designation / Status	-
Date	

# Bond for export of goods or services without payment of integrated tax (See rule 96A)



President of India (hereinafter called "the President") in the sum of......rupees to be paid to the President for which payment will and truly to be made. I/We jointly and severally bind myself/ourselves and my/our respective heirs/ executors/ administrators/ legal representatives/successors and assigns by these presents; Dated this.....day of....; WHEREAS the above bounden obligor has been permitted from time to time to supply goods or services for export out of India without payment of integrated tax; and whereas the obligor desires to export goods or services in accordance with the provisions of clause (a) of sub-section (3) of section 16; AND WHEREAS the Commissioner has required the obligor to furnish bank guarantee for an amount of...... rupees endorsed in favour of the President and whereas the obligor has furnished such guarantee by depositing with the Commissioner the bank guarantee as afore mentioned; The condition of this bond is that the obligor and his representative observe all the provisions of the Act in respect of export of goods or services, and rules made thereunder; AND if the relevant and specific goods or services are duly exported; AND if all dues of Integrated tax and all other lawful charges, are duly paid to the Government along with interest, if any, within fifteen days of the date of demand thereof being made in writing by the said officer, this obligation shall be void; OTHERWISE and on breach or failure in the performance of any part of this condition, the same shall be in full force and virtue: AND the President shall, at his option, be competent to make good all the loss and damages, from the amount of bank guarantee or by endorsing his rights under the above-written bond or both; I/We further declare that this bond is given under the orders of the Government for the performance of an act in which the public are interested; IN THE WITNESS THEREOF these presents have been signed the day hereinbefore written by the obligor(s). Signature(s) of obligor(s). Date: Place: Witnesses (1) Name and Address Occupation (2) Name and Address Occupation Accepted by me this......day of ...... (month)..... (year) .....of ......(Designation) for and on behalf of the President of India.



### Letter of Undertaking for export of goods or services without payment of integrated tax

(See rule 96A)

То	
The President of India (hereinafter called the "President of India)	nt"), acting through the proper officer
Services Tax Identification Number Noundertaker(s) including my/our respective heirs, executive heirs,	(address of the registered person) having Goods &, hereinafter called "the cutors/ administrators, legal representatives/successors severally undertake on this day of
(a) to export the goods or services supplied without parule (1) of rule 96A;	yment of integrated tax within time specified in sub-
(b) to observe all the provisions of the Goods and Ser export of goods or services;	vices Tax Act and rules made thereunder, in respect of
· / · · ·	ailure to export the goods or services, along with an on the amount of tax not paid, from the date of invoice
I/We declare that this undertaking is given under the enacts in which the public are interested.	e orders of the proper officer for the performance of
IN THE WITNESS THEREOF these presents have undertaker(s)	ve been signed the day hereinbefore written by the
Signature(s) of undertaker(s).	
Date : Place :	
Witnesses (1) Name and Address (2) Name and Address	Occupation Occupation

for and on behalf of the President of India.

Date Place

Accepted by me this......day of ...... (month)..... (year)

(Designation)

.....of.....

<sup>\*</sup>FORM GST RFD-11 has been substituted by Notification No. 1221-F.T. dated 06.07.2017 w.e.f. 01.07.2017.



[See rule 98(1)]

## ${\bf Application\ for\ Provisional\ Assessment\ under\ section\ 60}$

1.GSTIN								
2. Name								
3. Addres	S							
4. Details	of Commodity	y / Service for whi	ch tax rate / v	aluation	is to be dete	ermined	l	
Sr. No.	HSN	Name of		Tax	rate		Valuation	
		commodity /service	Central	State/	Integrated	Cess		monthly turnover of
		/ SCI VICC	tax	UT	tax			the
				tax				commodity
								/ service
1	2	3	4	5	6	7	8	9
5. Reason for seeking provisional assessment								
6. Docum	ents filed							
7. Verific	ation-							
	·	mnly affirm and d			•		bove is true	and correct to
the best o	f my knowledg	ge and belief and n	othing has be	en conce	ealed therefr	om.		
				Sigi Na	nature of Au	thorised	d Signatory	

Designation / Status -----

Date -----



Designation

## Form GST ASMT - 02

[See rule 98(2)]

Reference No.:	Date:
To	
GSTIN	
GSTIN Name	
(Address)	
Application Reference No. (ARN)	Dated
Notice for Seeking Additional Information / Clarif	ication / Documents for provisional assessment
Please refer to your application referred to above. Whil it has been found that the following information/docume	
< <text>&gt;</text>	
You are, therefore, requested to provide the information date of service of this notice to enable this office to tak information is received by the stipulated date your apreference to you.  You are requested to appear before the undersign Venue>>.	te a decision in the matter. Please note that in case no
	Signature
	Name



[See rule 98(2)]

# Reply to the notice seeking additional information

1. GSTIN		
2. Name		
3. Details of notice vide which additional information sought	Notice No.	Notice date
4. Reply		
5. Documents filed		
Verification-		
here		
en hereinabove is true and correct to the best of my keefrom.	nowledge and belief and n	othing has been conce
	Signature of Authorise	d Signatory
	Nam	e
	Designation / Statu	ıs
	Date	



[See rule 98(3)]

	[See ruie 98(3)]
Reference No.:	Date
То	
GSTIN - Name - Address -	
Application Reference No. (ARN)	Dated
Order of Acceptance	e or Rejection of Provisional Assessment
• • • • • • • • • • • • • • • • • • • •	ion mentioned above and reply dated, furnishing request for provisional assessment. Upon examination of your sessment is allowed as under:
words) in the form of (mode) and Please note that if the bond and security assessment order will be treated as null and <b>Or</b>	oject to furnishing of security amounting to Rs (in bond in the prescribed format by (date).  The are not furnished within the stipulated date, the provisional void as if no such order has been issued.  The are not furnished within the stipulated date, the provisional void as if no such order has been issued.
information/documents in support of your re Your request for provisional assessment has the following reasons:	
< <text>&gt;</text>	

Signature Name Designation



[See rule 98(4)]

#### **Furnishing of Security**

1. GSTIN							
2. Name							
3. Order vide which security is prescribed			Order N	0.	Order d	Order date	
4. Details	s of the security	y furnished	•				
Sr. No.	Mode	Reference no. / Debit entry no. (for cash payment)	Date	Amount		Name of Bank	
1	2	3	4	5		6	

Note – Hard copy of the bank guarantee and bond shall be submitted on or before the due date mentioned in the order.

#### 5. Declaration -

- (i) The above-mentioned bank guarantee is submitted to secure the differential tax on the supply of goods and/or services in respect of which I/we have been allowed to pay taxes on provisional basis.
- (ii) I undertake to renew the bank guarantee well before its expiry. In case I/We fail to do so the department will be at liberty to get the payment from the bank against the bank guarantee.
- (iii) The department will be at liberty to invoke the bank guarantee provided by us to cover the provisional assessment in case we fail to furnish the required documents/ information to facilitate finalization of provisional assessment.

Signature of Authorised Signatory

Name	
Designation / Status	
Date	



Designation

## Form GST ASMT - 06

[See rule 98(5)]

Reference No.:	Date:
То	
GSTIN -	
Name -	
Address -	
Application Reference No. (ARN)	Date
Provisional Assessment order no	Date
Notice for seeking additional information / o	clarification / documents for final assessment
Please refer to your application and provisional a information / documents are required for finalization of	assessment order referred to above. The following of provisional assessment:
< <text>&gt;</text>	
the date of receipt of this notice to enable this office t no information is received by the stipulated date your further reference to you.	ion /documents within a period of << 15 days>>from o take a decision in the matter. Please note that in case application is liable to be rejected without making any gned for personal hearing on << Date Time
	Signature
	Name



[See rule 98(5)]

Reference No.:	Date			
To GSTIN Name Address				
Provisional Assessment order No	dated			
Final Ass	sessment Order			
Preamble - << Standard >>				
In continuation of the provisional	assessment order referred to above and on the basis of			
information available / documents furnished, the fir	nal assessment order is issued as under:			
Brief facts –				
Submissions by the applicant -				
Discussion and finding -				
Conclusion and order -				
The security furnished for the purpo	ose can be withdrawn after compliance with the order by			
filing an application.				
	Signature Name			
	Designation			



[See rule 98(6)]

## **Application for Withdrawal of Security**

1. GST	IN				
2. Name	;				
3. Detail	ls vide which	security furnished	AF	RN	Date
4. Detai	ls of the secur	rity to be withdrawn			
Sr. No.	Mode	Reference no. / Debit entry no. (for cash payment)	Date	Amount	Name of Bank
1	2	3	4	5	6
	ereinabove is	true and correct to the be			firm and declare that the
Signatur	e of Authorised	d Signatory			
Name					
Designat	ion / Status -				
Date -					



[See rule 98(7)]

Reference No.: Date		
To		
GSTIN Name		
Address		
Application Reference No	dated	
Order for release of s	security or rejecting the application	
This has reference to your a	pplication mentioned above regarding release of security	
amounting to Rs [ Rupe	es (in words)]. Your application has been examined and the	
same is found to be in order. The aforesaid secu	urity is hereby released. Or	
Your application referred to above regarding re	clease of security was examined but the same was not found to	
be in order for the following reasons:		
< <text>&gt;</text>		
Therefore, the application for release of	security is rejected.	
	Signature Name	
	Designation Date	



[See rule 99(1)]

Reference No.:	Date:
To GSTIN:	
Name:	
Address:	
Tax period - F.Y	
	Notice for intimating discrepancies in the return after scrutiny
This is to inform the discrepancies have be	at during scrutiny of the return for the tax period referred to above, the following een noticed:
	< <text>&gt;</text>
explanation is receive	ted to explain the reasons for the aforesaid discrepancies by (date). If no ed by the aforesaid date, it will be presumed that you have nothing to say in the matter ecordance with law may be initiated against you without making any further reference to
	Signature Name Designation



[See rule 99(2)]

### Reply to the notice issued under section61 intimating discrepancies in the return

1. GS'	ΓIN								
2. Nar	ne								
3. Det	ails o	f the not	ice		Reference No.		Date	Date	
4. Tax	Perio	od							
5. Rep	oly to	the discr	repancies						
Sr. No. Discrepancy				Reply					
6. Am	ount	admitted	and paid,	if any -					
	Act Tax Into		Inter	rest	Others	Total			
7. Ver	ificat	ion-							I
	meat	ion							
I						•	•		at the information
_		nabove is	s true and	correct to	the best of	of my knowledge	and belief an	nd nothing h	as been concealed
theref	rom.								
Signat	ture o	f Author	ised Signa	tory					
Name	e								
Design	nation	n / Status	;						
Date -	_								



[See rule 99(3)]

Reference No.:		Date:	
To GSTIN Name Address	Tax period -	F.Y	
	ARN -	Date -	
Or	der of acceptance of 1	eply against the notice issued under section 61	
	• • •	e satisfactory and no further action is required to be taken in	

Signature Name Designation



### **#FORM GST ASMT-13**

[See rule 100(1)]

	[See rine	100(1)]
Reference No.:		Date:
То		
	_(GSTIN/ID)	
	_ Name	
	_(Address)	
Tax Period:	F.Y. :	Return Type:
Notice Reference		Date :
	Assessment	order under section 62
Preamble - << st	andard >>	
The notice referre	d to above was issued to you under s	ection 46 of the Act for failure to furnish the return for the said
tax period. From	the records available with the departr	ment, it has been noticed that you have not furnished the said
return till date.		
Therefore, on the	basis of information available with the	ne department, the amount assessed and payable by you is as
under:		
Introduction:		
Submissions, if ar	ny:	
Discussions and F	findings:	
Conclusion:		
Amount assessed	and payable (Details at Annexure):	
		(Amount in Rs.)

Sr. No.	Tax	Turnover	Tax pe	riod	Act	POS	Tax	Interest	Penalty	Others	Total
	rate		From	То		(Place of supply)					
1	2	3	4	5	6	7	8	9	10	11	12

						S A GRAMAI
						AND CONTIONERS
Total						

Please note that interest has been calculated up to the date of passing the order. While making payment, interest for the period between the date of order and the date of payment shall also be worked out and paid along with the dues stated in the order.

You are also informed that if you furnish the return within a period of 30 days from the date of service of this order, the order shall be deemed to have been withdrawn; otherwise, proceedings shall be initiated against you, after the aforesaid period, to recover the outstanding dues.

Signature

Name

Designation

Jurisdiction

Address

#### Note -

- 1. Only applicable fields may be filled up.
- 2. Column nos. 2, 3, 4 and 5 of the above Table i.e. tax rate, turnover and tax period are not mandatory.
- 3. Place of Supply (POS) details shall be required only if demand is created under IGST Act.

<sup>\*</sup>Subs. by Notification no. 559-F.T. dated 29.03.2019 w.e.f. 01.04.2019.



[See rule 100(2)]

Reference No:	Date:
To	
Name	
Address	
Tax Period	F.Y
Show C	Cause Notice for assessment under section 63
•	you/your company/firm, though liable to be registered under section in registration and failed to discharge the tax and other liabilities under elow:
OR	
It has come to my notice that your r	registration has been cancelled under sub-section (2) of section 29 with ence No. ———, dated] and that you are liable to pay tax for
created against you <sup>2</sup> [omitted] and w Act or the rules made thereunder.	rected to show cause as to why a tax liability along with interest not be thy penalty should not be imposed for violation of the provisions of the rected to appear before the undersigned on (date) at (time)
	Signature Name Designation <sup>1</sup> [Address]
1. Inscript of his motification No. 1002 F.T. Just	

<sup>1.</sup> Inserted by notification No. 1002-F.T. dated 14.09.2021 w.e.f. 29.08.2021.

<sup>2.</sup> Omitted by ibid w.e.f. 29.08.2021 the words "for conducting business without registration despite being liable for registration".



# \*FORM GST ASMT - 15

[See rule 100(2)]

Reference No.:		Date:
To		
	_(GSTIN/ID)	
	_ Name	
	_(Address)	
Tax Period :		F.Y.:
SCN reference no	). :	Date :
		Assessment order under section 63
	Pream	le - << standard >>
The notic	e referred to above was	ssued to you to explain the reasons for continuing to conduct business as an
un-registered pers	son, despite being liable	o be registered under the Act.
OR		
The notic	e referred to above was	ssued to you to explain the reasons as to why you should not pay tax for the
period	as your registration has	been cancelled under sub-section (2) of section 29 with effect from
Whereas,	no reply was filed by y	u or your reply was duly considered during proceedings held on
date(s).		
On the ba	asis of information avail	ble with the department / record produced during proceedings, the amount
assessed and paya	able by you is as under:	
Introduction:		
Submissions, if an	ny:	
Conclusion (to dr	op proceedings or to cre	ite demand):
Amount assessed	and payable:	
		(Amount in Rs.)

	Sr.	Tax Rate	Turnover	Tax Peri	od	Act	POS	Tax	Interest	Penalty	Others	Total
	No.			From	То		(Place of Supply)					
	1	2	3	4	5	6	7	8	9	10	11	12
,	Total											

Please note that interest has been calculated upto the date of passing the order. While making payment, interest for une period between the date of order and the date of payment shall also be worked out and paid along with the dues stated in the order.

You are hereby directed to make the payment by << date >> failing which proceedings shall be initiated against you to recover the outstanding dues.

Signature

Name

Designation

Jurisdiction

Address

#### Note -

- 1. Only applicable fields may be filled up.
- 2. Column nos. 2, 3, 4 and 5 of the above Table i.e. tax rate, turnover and tax period are not mandatory.
- 3. Place of Supply (POS) details shall be required only if demand is created under IGST Act.

<sup>\*</sup>Subs. by Notification No.559-F.T. dated 29.03.2019 w.e.f. 01.04.2019.



### **#FORM GST ASMT - 16**

[See rule 100(3)]

Reference No.:								Date:		
То										
	_(GSTI	N/ID)								
	_ Name									
	_ (Addre	ess)								
Tax Period :						F.Y. :				
			Asses	sment ord	ler unde	er section 6	4			
				Preaml	ole - <<	standard >>				
It has con	ne to my	notice that un	-accou	nted for go	ods are	lying in sto	ck at godov	vn	(address)	or in a
vehicle stationed	at	(address	s & veh	icle detail	) and you	u were not a	able to, acco	ount for	these goods	s or produce
any document sh	owing the	e detail of the	goods.							
Therefore, I proce	eed to ass	sess the tax du	e on su	ich goods a	as under:					
Introduction:										
Discussion & fine	ding:									
Conclusion:										
Amount assessed	and paya	able (details at	Annex	cure):						
									(Amour	nt in Rs.)
Sr. Tax 7	Turnover	Tax Period	Act	POS	Tax	Interest	Penalty	Fee	Others	Total

Sr.	Tax	Turnover	Tax P	eriod	Act	POS	Tax	Interest	Penalty	Fee	Others	Total
No.	Rate		From	То		(Place of Supply)						
1	2	3	4	5	6	7	8	9	10	11	12	13
Total												

The table has been substituted by notification No. 867-F.T. dated 04.11.2020 w.e.f. 15.11.2020.

Please note that interest has been calculated upto the date of passing the order. While making payment, interest for the period between the date of order and the date of payment shall also be worked out and paid along with the dues stated in the order.



You are hereby directed to make the payment by << date >> failing which proceedings shall be initiated against you to recover the outstanding dues.

Si	gnature

Name

Designation

Jurisdiction

Address

#### Note -

- 1. Only applicable fields may be filled up.
- 2. Column nos. 2, 3, 4 and 5 of the above Table i.e. tax rate, turnover and tax period are not mandatory.
- 3. Place of Supply (POS) details shall be required only if demand is created under IGST Act.

# Subs. by Notification No. 559-F.T. dated 29.03.2019 w.e.f. 01.04.2019.



[See rule 100(4)]

### Application for withdrawal of assessment order issued under section 64

1. GSTIN /ID		
2. Name		
3. Details of the order	Reference No.	Date of issue of order
4. Tax Period, if any		
5. Grounds for withdrawal		
6. Verification-		
I	hereby solen	nnly affirm and declare that the
information given hereinabove	is true and correct to the best of r	ny knowledge and belief and
nothing has been concealed the	refrom.	
Signature of Authorised Signator	ory	
Name		
Designation / Status		
Date -		



[See rule 100(5)]

Reference No.:		Date:
GSTIN/ID Name Address		
ARN -	Date –	
Acceptan	nce or Rejection of application fi	iled under section 64 (2)
and the assessment order no <b>OR</b>	dated stands with	as been considered and found to be in order ndrawn.  The state of the
Therefore, the application filed l	< <text box="">&gt; by you for withdrawal of the order</text>	r is hereby rejected.
		Signature Name Designation



[See rule 101(2)]

Reference No.:	Date:
То,	
GSTIN	
Name	
Period - F.Y.(s)	
	Notice for conducting audit
	rtake audit of your books of account and records for the financial year(s) with the provisions of section 65. I propose to conduct the said audit at on
documents as may be required in this	ressary facility to verify the books of account and records or other s context, and be required and render assistance for timely completion of the audit.
· · · · · · · · · · · · · · · · · · ·	n person or through an authorised representative on
books of account and proceedings a	his notice, it would be presumed that you are not in possession of such as deemed fit may be initiated as per the provisions of the Act and the ithout making any further correspondence in this regard.
	Signature
	Name



[See rule 101(5)]

		[See rule 10	/1( <i>3)</i> ]		
Reference No.:			Date:		
То,					
Name	·	•••			
Audit Report No	dated				
	$\mathbf{A}$	udit Report under	r section 65(6)		
				examined and this Audiou and the findings are a	-
Short payment of	Integrated tax	Central tax	State /UT ta	x Cess	]
Tax					
Interest					
Any other amount					
[Upload pdf file co	ontaining audit obser	rvation]			
	nder, failing which	•		er the provisions of the abe initiated against you	
				Signature Name Designation	



[See rule 102(1)]

Reference No.:	Date:
То,	
GSTIN Name Address	
Tax period - F.Y.(s)	
Communication to the regis	tered person for conduct of special audit under section 66
Whereas the proceedings of scrutiny of	return /enquiry/investigation/ are going on;
	get your books of account and records examined and audited to chartered accountant / cost accountant nominated by the
You are hereby directed to get your bocost accountant.	oks of account and records audited by the said chartered accountan
	Signature  Name  Designation



[See rule 102(2)]

Reference No.:			Date:		
То,					
GSTIN Name					
accountant/cost ac	count and records for	Audit Report is	has been exaprepared on the	amined bybasis of information	•
Short payment of	Integrated tax	Central tax	State /UT tax	Cess	]
Tax					
Interest					
Any other amount					
[Upload pdf file co	ontaining audit obser	vation]			
	nder, failing which	•		the provisions of the e initiated against you	
			1	ignature Name Designation	

## Form GST ARA -01





# **Application Form for Advance Ruling**

1.	GSTIN Number/ User-id		
2.	Legal Name of Applicant		
3.	Trade Name of Applicant (Optional)		
4.	Status of the Applicant [registered / unregistered]		
5.	Registered Address / Address provided while obtaining user id		
6.	Correspondence address, if different from above		
7.	Mobile No. [with STD/ISD code]		
8.	Telephone No. [with STD/ISD code]		
9.	Email address		
10.	Jurisdictional Authority	< <nam< td=""><td>e, designation, address&gt;&gt;</td></nam<>	e, designation, address>>
11.	i. Name of Authorised representative		Optional
	ii. Mobile No.	iii. Email Address	
12.	Nature of activity(s) (proposed / present) i	n respect of which advance rul	ling sought
	A. Category		<b>_</b>
	Factory / Manufacturing	Wholesale Business	Retail Business
	Warehouse/Deport	Bonded Warehouse	Service Provision
	Office/Sale Office	Leasing Business	Service Recipient
	EOU/ STP/ EHTP	SEZ	Input Service Distributor (ISD)
	Works Contract		
	B. Description (in brief)	(Provisi	on for file attachment also)
13.	Issue/s on which advance ruling required (	Tick whichever is applicable)	:-
	(i) classification of goods and/or services or both		
	(ii) applicability of a notification issued under the provisions of the Act		
	(iii) determination of time and value of supply of goods or services or both		

	(iv) admissibility of input tax credit of tax paid or deemed to have been paid	- OF THE PROPERTY OF THE PROPE
	(v) determination of the liability to pay tax on any goods or services or both	
	(vi) whether applicant is required to be registered under the Act	
	(vii) whether any particular thing done by the applicant with respect to any goods and/or services or both amounts to or results in a supply of goods and/or services or both, within the meaning of that term	
14.	Question(s) on which advance ruling is required	
15.	Statement of relevant facts having a bearing on the question(s) raised.	
16.	Statement containing the applicant's interpretation of law and/or facts, as the case may be, in respect of the aforesaid question(s) (i.e. applicant's view point and submissions on issues on which the advance ruling is sought).	
17.	I hereby declare that the question raised in	the application is not (tick) -
		in the applicant's case under any of the provisions of the Act in the applicant's case under any of the provisions of the Act
18.	Payment details	Challan Identification Number (CIN) – Date -
doc	emnly declare that to the best of my knowle	VERIFICATION  In block letters), son/daughter/wife of do hereby dge and belief what is stated above and in the annexure(s), including the cation in my capacity as (designation) and that I lify it.
		Signature
Pla		Name of Applicant/Authorised Signatory
Da	te	Designation/Status



### Form GST ARA -02

[See Rule 106(1)]

### Appeal to the Appellate Authority for Advance Ruling

Sr. No.	Particulars	Remarks
1	Advance Ruling No.	
2	Date of communication of the advance ruling	DD/MM/YYYY
3	GSTIN / User id of the appellant	
4	Legal Name of the appellant.	
5	Trade Name of the appellant (optional).	
6	Address of appellant at which notices may be sent	
7	Email Address of the appellant	
8	Mobile number of the appellant	
9	Jurisdictional officer / concerned officer	
10	Designation of jurisdictional officer / concerned officer	
11	Email Address of jurisdictional officer / concerned officer	
12	Mobile number of jurisdictional officer / concerned officer	
13	Whether the appellant wishes to be heard in person?	Yes/No
14.	The facts of the case (in brief)	
15.	Ground of Appeal	
16.	Payment details	Challan Identification Number (CIN) – Date -
	Prayer	
	<ul> <li>In view of the foregoing, it is respectfully prayed that the Ld. A may be pleased to:</li> <li>a. set aside/modify the impugned advance ruling passed by Ruling as prayed above;</li> <li>b. grant a personal hearing; and</li> <li>c. pass any such further or other order (s) as may be deemed circumstances of the case.</li> <li>And for this act of kindness, the appellant, as is duty bound, sha</li> </ul>	the Authority for Advance d fit and proper in facts and

#### VERIFICATION

I, \_\_\_\_\_\_ (name in full and in block letters), son/daughter/wife of \_\_\_\_\_\_ do hereby solemnly declare that to the best of my knowledge and belief what is stated above and in the annexure(s), including the

documents are correct. I am making t am competent to make this applicatio	(designation) an	
		Signature
Place	Name of Appellant/Authoris	sed Signatory
Date	Designation/ St	tatus



#### Form GST ARA -03

[See Rule 106(2)]

#### Appeal to the Appellate Authority for Advance Ruling

Sr. No.	Particulars	Remarks		
1	Advance Ruling No.			
2	Date of communication of the advance ruling	DD/MM/YYYY		
3	GSTIN, if any / User id of the person who had sought advance ruling			
4	Legal Name of the person referred to in serial number 3.			
5	Name and designation of jurisdictional officer / concerned officer			
6	Email Address of jurisdictional officer / concerned officer			
7	Mobile number of jurisdictional officer / concerned officer			
8	Whether the jurisdictional officer / concerned officer wishes to be heard in person?	Yes/No		
9.	Facts of the case (in brief)			
10.	Grounds of Appeal			
	Prayer			
	In view of the foregoing, it is respectfully prayed that the Ld. Appellate Authority, may be pleased to:			
	a. set aside/modify the impugned advance ruling passed by the Authority for Ruling as prayed above;			
	<ul><li>b. grant a personal hearing; and</li><li>c. pass any such further or other order (s) as may be deemed fit and proper in fa circumstances of the case.</li></ul>			

### 



#### Form GST APL - 01

[See Rule 108(1)]

#### **Appeal to Appellate Authority**

- 1. GSTIN/ Temporary ID/UIN-
- 2. Legal name of the appellant -
- 3. Trade name, if any –
- 4. Address -
- 5. Order no.- Order date -
- 6. Designation and address of the officer passing the order appealed against -
- 7. Date of communication of the order appealed against -
- 8. Name of the authorized representative -
- 9. Details of the case under dispute -
- (i) Brief issue of the case under dispute -
- (ii) Description and classification of goods/ services in dispute-
- (iii) Period of dispute-
- (iv) Amount under dispute:

Description	Central	State/ UT tax	Integrated	Cess
	tax		tax	
a) Tax/ Cess				
b) Interest				
c) Penalty				
d) Fees				
e) Other charges				

- (v) Market value of seized goods
- 10. Whether the appellant wishes to be heard in person Yes / No
- 11. Statement of facts:-
- 12. Grounds of appeal:-
- 13. Prayer:-
- 14. Amount of demand created, admitted and disputed

demand/refund			tax	UT tax	tax		SERVING OF
		a) Tax/ Cess				< total >	PRACTITIONER
	Amount	b) Interest				< total >	
	demand	c) Penalty				< total >	< total >
	created (A)	d) Fees				< total >	
		e) Other charges				< total >	
		a) Tax/ Cess				< total >	
	Amount	b) Interest				< total >	
	admitted	c) Penalty				< total >	< total >
		d) Fees				< total >	
		e) Other charges				< total >	
		a) Tax/ Cess				< total >	
	Amount	b) Interest				< total >	
	demand	c) Penalty				< total >	< total >
	disputed (C)	d) Fees				< total >	
		e) Other charges				< total >	

<sup>\$15.</sup> Details of payment of admitted amount and pre-deposit:-

# (a) Details of payment required:

Particulars			Central	State/ UT	Integrated	Cess	Total a	amount
			tax	tax	tax			
		Tax/ Cess					< total >	
	(a) Admitted	Interest					< total >	< total
	amount	Penalty					<total< td=""><td>&gt;</td></total<>	>
		Fees					< total >	
		Other					<	

	charges	total >
(b) Pre-deposit (10% of disputed tax /cess but not exceeding Rs. 25 crore each in respect of CGST, SGST or cess, or not exceeding Rs. 50 crore in respect of IGST and Rs. 25 crore in respect of cess)	Tax/ Cess	< total >
(c) Pre-deposit in case of subsection (3) of section 129	Penalty	< total >

The Table has been substituted by notification No. 69-F.T. dated 18.01.2022 w.e.f. 01.01.2022.

(b) Details of payment of admitted amount and pre-deposit (pre-deposit 10% of the disputed tax and cess but not exceeding Rs. 25 crore each in respect of CGST, SGST or cess, or not exceeding Rs. 50 crore in respect of IGST and Rs. 25 crore in respect of cess):

Sr. No.	Description	Tax payable	Paid through Cash/ Credit Ledger	Debit		Amount of tax paid			
NO.		payable		entry no.	Central tax	State/UT tax	Integrated tax	CESS	
1	2	3	4	5	6	7	8	9	
1.	Integrated		Cash Ledger						
	tax		Credit Ledger						
2.	2. Central tax		Cash Ledger						
			Credit Ledger						
3.	State/UT		Cash Ledger						
	tax		Credit Ledger						
4.	CESS		Cash Ledger						
			Credit Ledger						

(c) Interest, penalty, late fee and any other amount payable and paid:

Sr. No.	Description	Amount payable			Debit entry		Amour	nt paid	FRVING OST, ARACTIT	
110.		Integrated	Central	State/UT	CESS	no.	Integrated	Central	State/UT	CEss
		tax	tax	tax			tax	tax	tax	
1	2	3	4	5	6	7	8	9	10	11
1.	Interest									
2.	Penalty									
3.	Late fee									
4.	Others (specify)									

16. Whether appeal is being filed after the prescribed period - Yes / No

17.	If	Yes'	in item 17 –
	(a)P	eriod	of delay –
	(b)	Reas	ons for delay -

\*18. Place of supply wise details of the integrated tax paid (admitted amount only) mentioned in the Table in sub-clause (a) of clause 15(item (a)), if any:

Place of Supply (Name of State/UT)	Demand	Tax	Interest	Penalty	Other	Total
1	2	3	4	5	6	7
	Admitted amount [in the Table in sub-clause (a) of clause 15 (item (a))]					

#### Verification

I, <hereinabove is="" th="" therefrom.<="" true=""><th>, hereby solemnly affirm and declare that the information given and correct to the best of my knowledge and belief and nothing has been concealed</th></hereinabove>	, hereby solemnly affirm and declare that the information given and correct to the best of my knowledge and belief and nothing has been concealed
Place: Date:	<signature></signature>



### Name of the Applicant:

<sup>&</sup>lt;sup>\$</sup> Substituted by Notification No. 173-F.T. dated 29.01.2019 w. e. f. 01.02.2019. <sup>#</sup>Inserted by Notification No. 173-F.T. dated 29.01.2019 w. e. f. 01.02.2019.



[See Rule 108(3)]

#### Acknowledgment for submission of appeal

# <Name of applicant><GSTIN/Temp ID/UIN/Reference Number with date>

Your appeal has been successfully filed against < Application Reference Number >

	Reference Number-			
2.	Date of filing-			
3.	Time of filing-			
4.	Place of filing-			
5.	Name of the person filin	g the appeal-		
6.	Amount of pre-deposit-			
7.	Date of acceptance/rejec	ction of appeal-		
8.Dat	e of appearance-	Date:		Time:
9. Co	ourt Number/ Bench	Court:		Bench:
Place: Date:	< Sig	nature>		
			Designation:	Name:
	Tribur		alf of Appellate Auth r / Additional or Joir	• • •



[See Rule 109(1)]

# Application to the Appellate Authority under sub-section (2) of Section 107

			D ' '		
			Designation-		
			Jurisdiction-		
			State/Center-		
			Name of the	State-	
GSTIN/ Temporary ID	/UIN-				
Order no.	Date-				
Designation and address	ss of the officer p	oassing the orde	er appealed aga	ainst-	
Date of communication	of the order app	ealed against-			
Details of the case unde	er dispute-				
(i)				Brief issue of	f the case
under dispute-					
(ii)				Description a	and
classification of g	oods/ services in	dispute-			
(iii)				Period of dis	pute-
(iv)	Amou	nt under disput	e-		
Description	Central tax	State/ UT	Integrated	Cess	
		tax	tax		
a) Tax/ Cess					
b) Interest					
•					
•					
e) Other charges					
	Order no.  Designation and address Date of communication Details of the case under  (i)  under dispute-  (ii)  classification of gr  (iii)  (iv)  Description	Designation and address of the officer production of the order appropriate of communication of the order appropriate of the case under dispute-  (i)  under dispute-  (ii)  classification of goods/ services in (iii)  (iv)  Amout Description  Central tax  a) Tax/ Cess  b) Interest  c) Penalty  d) Fees	Order no. Date- Designation and address of the officer passing the order Date of communication of the order appealed against- Details of the case under dispute- (i) under dispute- (ii) classification of goods/ services in dispute- (iii) (iv) Amount under dispute  Description Central tax State/ UT tax  a) Tax/ Cess b) Interest c) Penalty d) Fees	Name of the GSTIN/ Temporary ID /UIN- Order no. Date- Designation and address of the officer passing the order appealed against- Details of the case under dispute- (i) under dispute- (ii) classification of goods/ services in dispute- (iii) (iv) Amount under dispute-  (iii)  Obscription Central tax State/ UT Integrated tax a) Tax/ Cess b) Interest c) Penalty d) Fees	Order no. Date- Designation and address of the officer passing the order appealed against- Date of communication of the order appealed against- Details of the case under dispute-  (i) Brief issue of under dispute-  (ii) Description a classification of goods/ services in dispute-  (iii) Period of disting the dispute-  Description Central tax State/UT Integrated tax tax  a) Tax/Cess  b) Interest  c) Penalty  d) Fees

9. Prayer-

Grounds of appeal-

8.

# 10. Amount of demand in dispute, if any -



Particulars of	Particulars (		Central	State/UT	Integrated	Cess	Total an	nount
demand/refund,			tax	tax	tax			
if any		a) Tax/ Cess					< total >	
	Amount of demand	b) Interest					< total >	<
	created, if	c) Penalty					< total >	total >
	(A)	d) Fees					< total >	
		e) Other charges					< total >	
		a) Tax/ Cess					< total >	
	Amount	b) Interest					< total >	<
	under dispute	c) Penalty					< total >	total >
	(B)	d) Fees					< total >	
		e) Other charges					< total >	

D	ate:
<	Signature>

Name of the Applicant Officer:

Designation: Jurisdiction:



#### **#FORM GST RVN-01**

[See rule 109B]

Reference No.	Date -	
To,		
GSTIN:		
Order No. –		
Date -		
Notic	ce under section 108	
State>>Goods and Services Tax Act, 2017/the Integration to States) Act, 2017 by prejudicial to the interest of revenue and is illegal or therefore, I intend to pass an order in revision un herewith.	ned that decision/order passed under this Act/ the << Name of the grated Goods and Services Tax Act, 2017/ the Goods and Service(Designation of officer) is erroneous in so far as it is r improper or has not taken into account certain material facts, ander section 108 on grounds specified in the document attaches to this notice within seven working days from the date of service	es is nd ed
• • • • • • • • • • • • • • • • • • • •	undersigned on DD/MM/YYYY at HH/MM ate or fail to appear for personal hearing on the appointed date an of available records and on merits	nd
Place:	Signature:	
Date:	Designation:  Jurisdiction / Office –.	

# Inserted by Notification No. 1893-F.T. dated 31.12.2018 w. e. f. 31.12.2018.



[See rules 109B, 113 (1) and 115 ]

# SUMMARY OF THE DEMAND AFTER ISSUE OF ORDER BY THE APPELLATE AUTHORITY, REVISIONAL AUTHORITY, TRIBUNAL OR COURT

Date -

1.		GSTIN/ Temporary ID/UIN -		
2.		Name of the appellant / person -		
3.		Address of the appellant / person-		
	4.	Order appealed against or intended to be revised -	Number-	Date-
	5.	Appeal no.	Date-	

- 6. Personal Hearing –
- 7. Order in brief-

Reference no. -

- 8. Status of order- Confirmed / Modified / Rejected
- 9. Amount of demand after appeal / revision:

Particular s	Central tax		State / UT tax		Integrated tax		Cess		Total	
5	Amoun	Determine								
	t in	d								
	dispute / earlier order	Amount								
1	2	3	4	5	6	7	8	9	10	11
a) Tax										
b)										
Interest										
c)										
Penalty										
d) Fees										
e) Others										
f)						;				
Refund										

10. Place of supply wise details of IGST demand

SK.K. AGRA	
SERVING C	KK.com.
9	To A
PACTITIONER	

Place of Supply (Name of State / UT)	Demand	Tax	Interest	Penalty	Other	Total
1	2	3	4	5	6	7
	Amount in dispute / earlier order					
	Determined Amount					

Place:	
Date:	

Signature:

Name of the Appellate Authority / Revisional Authority / Tribunal /

Jurisdictional Officer

Designation: Jurisdiction:

# Substituted by Notification No. 1893-F.T. dated 31.12.2018 w. e. f. 31.12.2018.



[See Rule 110(1)]

# Appeal to the Appellate Tribunal

•	GSTIN/ Temporary ID	UIN -				
2.	Name of the appellant -					
3.	Address of the appellant	ţ—				
١.	Order appealed against-		Number-	Date-		
<b>5.</b>	Name and Address of th	e Authority passi	ing the order a	ppealed against	-	
ó.	Date of communication	of the order appe	aled against -			
<b>7</b> .	Name of the representat	ive -				
3.	Details of the case unde	r dispute:				
	(i)					Brief issue of
	the case under dispu	ıte				
	(ii)					Description
	and classification of	f goods/ services	in dispute			
	(iii)		Period of			
	dispute					
	(iv)	Amou	nt under disput	te:		
	Description	Central tax	State/ UT tax	Integrated tax	Cess	
	a) Tax/ Cess					
	b) Interest					_
	c) Penalty					
	d) Fees					
	e) Other charges					
) <u>.</u>	(v) Whether the appellant w		ket value of sei	zed goods		
0.	Statement of facts	iones to be neuro	in person.			

11.

Grounds of appeal

# 12. Prayer



# 13. Details of demand created, disputed and admitted

Particulars of demand	Particulars		Central tax	State/UT tax	Integrated tax	Cess	Total aı	mount
		a) Tax/ Cess					< total >	
	Amount	b) Interest	_				< total >	
	demanded/ rejected >, if any	c) Penalty					< total >	total >
	(A)	d) Fees					< total >	
		e) Other charges					< total >	
		a) Tax/ Cess					< total >	
	Amount	b) Interest					< total >	
	under dispute	c) Penalty					< total >	total >
	(B)	d) Fees					< total >	
		e) Other charges					< total >	
		a) Tax/ Cess					< total >	
		b) Interest					< total >	
	Amount admitted (C)	c) Penalty					< total >	total >
		d) Fees					< total	
		e) Other charges					< total	

# 14. Details of payment of admitted amount and pre-deposit: (a)Details of amount payable :



Particulars		Central tax	State/UT tax	Integrated tax	Cess	Total a	mount
		lax	tax	tax			
	Tax/					< total	
	Cess					>	
	Interest					< total	
	Interest					>	
a) Admitted amount	Penalty					< total	
a) Admitted amount	Fenanty					>	
	Essa					< total	
	Fees					>	
	Other					< total	< total
	charges					>	>
b) Pre-deposit *(20% of							
disputed tax/cess but not							
exceeding Rs.50 crore							
each in respect of CGST,	Tax/					< total	
SGST or cess or not	Cess					>	
exceeding Rs.100 crore in respect of IGST and							
Rs.50 crore in respect of							
cess)							

(b) Details of payment of admitted amount and pre-deposit \$(pre-deposit of 20% of the disputed tax and cess but not exceeding Rs. 50 crore each in respect of CGST, SGST or cess or not exceeding Rs.100 crore in respect of IGST and Rs. 50 crore in respect of cess)

Sr. No.	Description	Tax payable	Paid through Cash/ Credit	Debit entry no.		Amount o	f tax paid	
NO.		payable	Ledger	entry no.	Integrated tax	Central tax	State/UT tax	CESS
1	2	3	4	5	6	7	8	9
1.	Integrated		Cash Ledger					
	tax		Credit Ledger					
2.	Central tax		Cash Ledger					
			Credit Ledger					
3.	State/UT		Cash Ledger					

	tax	Credit Ledger			SERVING OST, ARACILION	ERS TOT
4.	CESS	Cash Ledger				
	5 - 20 20	Credit Ledger				

(a) Interest, penalty, late fee and any other amount payable and paid:

Sr. No.	Description		Amount 1	payable		Debit entry		Amou	nt paid	
110.		Integrated tax	Central tax	State/UT tax	CESS	no.	Integrated tax	Central tax	State/UT tax	CESS
1	2	3	4	5	6	7	8	9	10	11
1.	Interest									
2.	Penalty									
3.	Late fee									
4.	Others (specify)									

\*15. Place of supply wise details of the integrated tax paid (admitted amount only) mentioned in the Table in sub-clause (a) of clause 14 (item (a)), if any:

Place of	Demand	Tax	Interest	Penalty	Other	Total
Supply						
(Name of						
State/UT)						
1	2	3	4	5	6	7
	Admitted amount [in the Table in subclause (a) of clause 14 (item (a))].					

	eation

I, <	>, hereby	solemnly a	ffirm and	d declare	that the	information	given
hereinabove is true and correct to t	the best of	my knowled	ge and b	elief and	nothing h	as been con	icealed
therefrom							

Place:	
Date:	
< Signature>	>



#### Name of the Applicant:

Designation /Status:

<sup>\*</sup> Substituted by Notification No. 173-F.T. dated 29.01.2019 w. e. f. 01.02.2019 for "(20% of disputed tax)". \$ Substituted by Notification No. 173-F.T. dated 29.01.2019 w. e. f. 01.02.2019 for "(pre-deposit 20% of the disputed admitted tax and cess)".

<sup>\*</sup>Inserted by Notification No. 173-F.T. dated 29.01.2019 w. e. f. 01.02.2019.



[See Rule 110(2)]

# ${\bf Cross-objections\ before\ the\ Appellate\ Authority\ /\ Appellate\ Tribunal}$

Sr. No.		Particulars								
1	Appeal No Date	of filing -								
2	GSTIN/ Temporary ID/UIN-									
3	Name of the appellant-									
4	Permanent address of the appellant-									
5	Address for communication-									
6	Order no.		Date-							
7.	Designation and Address of the officer p	passing the orde	r appealed agai	nst-						
8.	Date of communication of the order appe	ealed against-								
9.	Name of the representative-									
10.	Details of the case under dispute-									
(i)	Brief issue of the case under dispute-									
(ii)	Description and classification of goods/	services in disp	ute-							
(iii)	Period of dispute-									
(iv)	Amount under dispute	Central tax	State/UT tax	Integrated tax	Cess					
	a) Tax									
	b) Interest									
	c) Penalty									
	d) Fees									
	e) Other charges (specify)									
(v)	Market value of seized goods-									
11	State or Union Territory and the Commi passed (Jurisdiction details)-	ssionerate (Cen	tre) in which th	e order or decisi	on was					

12				plication filed with the Central tax/UT tax, as		by the
	Whethe	r the decision o	r order appealed	against involves any qu	uestion relating to pl	lace of supply
13	Yes	No				
14	In case tax	of cross-objecti	ons filed by a pe	rson other than the Cor	mmissioner of State/	UT tax/Central
		(ii) Order N (iii) GSTIN/	f the Adjudicatin number and date of UIN/Temporary involved:	of Order-		
	Head	Tax	Interest	Penalty	Refund	Total
	Integrated					
	Central ta					
	State/UT	tax				
	Cess					
15	Details	of payment		1	1	
	Head	Tax	Interest	Penalty	Refund	Total
	Central ta	ax				
	State/UT	tax				
	Integrated	d tax				
	Cess					
	Total					
16	In case	of cross-objecti	ons filed by the (	Commissioner State/UT	Γ tax/Central tax:	
	(i)	Amount of tax of dispute	demand droppe	d or reduced for the per	riod	
	(ii)	Amount of int period of disp		opped or reduced for the	e	
	(iii)	Amount of red	fund sanctioned of	or allowed for the period	d of	
	(iv)	Whether no or	· lesser amount in	nposed as penalty		

		Γ	ТОТ	AL																RVING OS
7	Reliefs	cla	aime	ed in	mei	morar	ndum	n of cr	oss -c	objection	ons.									
3	Ground	ls c	of C	ross	obje	ection	l							<b>-</b>						
									V	erific	ation	ı								
	I,stated a	<u>nbov</u>	∕e is	true (	to the	best o	of my	inform			ťł	l ne resp	ondent	, do	herel	oy d	eclar	e tha	t wha	nt is
	I,stated a							inform	nation a	and belie	tl f.	ne resp								nt is
	stated a							inform	nation a	and belie	tl f.	ne resp								nt is
	stated a	ed to	oday,	, the_		_		inform	nation a	and belie	tl f.	ne resp								nt is



[See Rule 111(1)]

# Application to the Appellate Tribunal under sub section (3) of Section 112

1.	Name and Designation of the app	ellant	Name:			
			Desig	nation		
			Jurisd	liction		
			State/	Centre		
			Name	of the State:		
2.	GSTIN/ Temporary ID /UIN-					
3.	Appellate Order no.	D	ate-			
4.	Designation and Address of the	e Appellat	e Authority pas	ssing the order	r appealed agai	nst-
5.	Date of communication of the	order appe	ealed against-			
6.	Details of the case under dispu	te:				
	(i)				Brief issue of	the case under
	dispute-					
	(ii)				Description a	nd
	classification of goods/ ser	vices in di	spute-			
	(iii)				Period of disp	oute-
	(iv)				Amount unde	er dispute:
	Description Ce	entral tax	State/UT tax	Integrated tax	Cess	
	a) Tax/ Cess					
	b) Interest					
	c) Penalty					
	d) Fees					
	e) Other charges					
			<u> </u>			I

- 7. Statement of facts-
- 8. Grounds of appeal-
- 9. Prayer-
- 10. Amount demanded, disputed and admitted:

Particulars of demand, if any	Par	Particulars			Integr ated tax	Cess	Total a	moun Rayle Programme
		a) Tax/ Cess					< total >	
	Amount of	b) Interest	-				< total >	< total
	demand created, if	c) Penalty					< total >	
	any (A)	d) Fees					< total >	>
		e) Other charges					< total >	
		a) Tax/ Cess					< total >	
		b) Interest	-				< total >	
	Amount under	c) Penalty	_				< total >	< total
	dispute (B)	d) Fees	_				< total >	- >
		e) Other charges					< total >	

Date: < Signature >			
Name of the Officer:	Designation:		
	Designation.	Jurisdiction:-	

Place:



[See Rule 114(1)]

# Appeal to the High Court under section 117

1.	Appear filed by	1 ax	table person / C	overnment of	<>				
2.	GSTIN/ Temporary ID/U	IN-							
	Name of the appellant/ off	icer-							
3.	Permanent address of the appellant, if applicable-								
4.	Address for communication-								
5.	Order appealed against	Numbe	er Date	e-					
6.	Name and Address of the	Appellate Trib	ounal passing th	ne order appea	led against-				
7.	Date of communication of the order appealed against-								
8.	Name of the representative								
9.	Details of the case under d	lispute:							
	(i) Brief issue of the case	under dispute	with synopsis						
	(ii) Description and classi	fication of goo	ods/ services in	dispute					
	(iii) Period of dispute								
(iv	Amount under dispute								
	Description	Central tax	State/UT tax	Integrated tax	Cess				
	a) Tax/ Cess								
	b) Interest								

- (v) Market value of seized goods
- 10. Statement of facts

c) Penalty

e) Other charges

d) Fees

- 11. Grounds of appeal
- 12. Prayer

# 13. Annexure(s) related to grounds of appeal



# Verification

I, <hereinabove is="" th="" therefrom.<="" true=""><th>•</th><th>nly affirm and declare that the information whedge and belief and nothing has been considered.</th><th>_</th></hereinabove>	•	nly affirm and declare that the information whedge and belief and nothing has been considered.	_
Place: Date:			
		<signature></signature>	
Name:	Designation/Status:		



#### Form GST TRAN - 1

[See rule 117(1),118,119,120]

#### **Transitional ITC / Stock Statement**

- 1. GSTIN -
- 2. Legal name of the registered person -
- 3. Trade Name, if any -
- 4. Whether all the returns required under existing law for the period of six months immediately preceding the appointed date have been furnished:- Yes/No
- 5. Amount of tax credit carried forward in the return filed under existing laws:

(a) Amount of Cenvat credit carried forward to electronic credit ledger as central tax (Section 140(1) and Section 140(4)(a))

1+0(+)(u)		·		1	1
Sl. no.	Registration no. under existing law (Central Excise and Service Tax)	Tax period to which the last return filed under the existing law pertains	Date of filing of the return specified in Column no. 3	Balance Cenvat credit carried forward in the said last return	Cenvat Credit admissible as ITC of central tax in accordance with transitio provisions
1	2	3	4	5	6
	Total				

(b) Details of statutory forms received for which credit is being carried forward

Period: 1st Apr 2015 to 30th June 2017

TIN of Issuer	Name of Issuer	Sr. No. of Form	Amount	Applicable VAT Rate						
C-Form										
Total										
F-Form										
Total										



H/I-Form								
Total								

(c) Amount of tax credit carried forward to electronic credit ledger as State/UT Tax(For all registrations on the same PAN and in the same State)

	Balance of	C For	rms	F Fo	rms		H/I	Forms
	ITC of VAT		Difference				Turnover	
Registration	and [Entry	Turnover for	tax	Turnover for		ITC reversal	for which	
No. in	Tax] in last	which forms	payable	which forms	Tax payable	relatable to	forms	Tax pa
existing law	return	Pending	on (3)	Pending	on (5)	[(3) and] (5)	Pending	on (7)
1	2	3	4	5	6	7	8	9

- 6. Details of capitals goods for which unavailed credit has not been carried forward under existing law (section 140 (2)).
- (a) Amount of unavailed cenvat credit in respect of capital goods carried forward to electronic credit ledger as central tax

Invoice	Invoice /	Supplier's	Recipients'	Detail	s of ca	pital	Total	Total	Total cenvat
/	documen	registration	registration	goods	goods on which		eligible	cenvat	credit
Docume	t	no.	no.	credit	has be	en	cenvat credit	credit	unavailed
nt	Doto	undar	under	partial	ly avai	led	under	availed	under existing
no	Date			Volue	Dut	ioa	existing	under	law
110.		existing	existing	varue			10m/	existing	(admissible as
		law	law				iaw	law	ITC of central
					pa.	Iu			tax) (9-10)
					ED/	SAI			
					CVD				
					CVD				
2	3	4	5	6	7	8	9	10	11
	TD 4.1								
	Total								
	nt no.	Docume t Date no.	Docume t no.  Date under existing law	Docume t no. no. no.  Date under existing law law  2 3 4 5	Docume t no. no. no. credit partial no. no. law law law 2 3 4 5 6	Docume nt Date under existing law law ED/  2 3 4 5 6 7	Docume nt Date under existing law law ED/ SAI CVD  2 3 4 5 6 7 8	Docume nt Date under existing law law Seen partially availed under existing law ED/ SAI CVD  2 3 4 5 6 7 8 9	Docume nt Date Date under existing law law SAI CVD CVD CVD CVD CVD Cenvat credit under existing law Compartially availed under existing law law CVD





(b) Amount of unavailed input tax credit carried forward to electronic credit ledger as State/UT tax (For all registrations on the same PAN and in the same State)

Sr.	Invoi	Invoi	Supplier	Recipients'	Details re	egarding	Total	Total VAT	Total VAT [and
n	ce/	ce /	's	registration	capital g	oods on	eligible	[and ET] credit	ET] credit
n o	Docu	docu	registrati	no.	which cr	edit is not	VAT [and	availed under	unavailed under
	ment	ment	on no.	under	availed		ET] credit	existing law	existing law
	no.		under	existing	Value Taxes paid		under		(admissible as
		Date	existing	C	, 41200	VAT [and	existing		ITC of State/UT
				law		ET]	law		tax) (8-9)
			law						
1	2	3	4	5	6	7	8	9	10
		Total							

- 7. Details of the inputs held in stock in terms of sections 140(3), 140(4)(b), 140(5) and 140(6).
- (a) Amount of duties and taxes on inputs claimed as credit excluding the credit claimed under Table 5(a) (under sections 140(3), 140(4)(b)

\*,140(6) and 140(7)

Sr. no.	Details of inputs he	eld in stock	or inputs c	ontained in semi-fin	ished or finished goods held in stock						
	*HSN as applicable	Unit	Qty.	Value	Eligible Duties paid on such inputs						
1	2	3	4	5	6						
7A Wh	ere duty paid invoices	are availa	ble								
Inputs	Inputs										
Inputs c	contained in semi-finishe	ed and finis	hed goods								
	7B Where duty paid invoices are not available (Applicable only for person other than manufacturer or service provider) – Credit in terms of Rule 117 (4)										
	Inputs		<u> </u>								
	I I I										

(b) Amount of eligible duties and taxes/VAT/[ET] in respect of inputs or input services under section 140(5) \*and section 140(7):

*Registration number of the supplier or input service distributor	Invoice number	Invoice date	Description	Quantity	UQC	Value	Eligible duties and taxes *(central taxes)	VAT/[ET]
distributor								

(c) Amount of VAT and Entry Tax paid on inputs supported by invoices/documents evidencing payment of tax carried forward to electronic credit ledger as SGST/UTGST under sections 140(3), 140(4)(b) and 140(6)

carried for wa	ara to c	Accuoine (	redit leager a	is 5051/01051 under section	13 170(3), 170(7)(0) 0	11tt 1+0(0)	
		Detai	ils of inputs in	stock	Total input tax	Total input tax credit	Tota
			T	T	credit claimed	related to exempt sales not	admi
Description	Unit	Qty	Value	VAT [and Entry Tax] paid	under earlier law	claimed under earlier law	SGS'
1	2	3	4	5	6	7	
Inputs					1	1	
Inputs conta	ined in	semi-finis	shed and finish	ned goods	•	•	

(d) Stock of goods not supported by invoices/documents evidencing payment of tax (credit in terms of rule 117 (4)) (*To be there only in States having VAT at single point*)

Details of inputs in stock											
Description Unit Qty Value Tax paid											
1	2	3	4 5								

Details of description and quantity of inputs / input services as well as date of receipt of goods or services (as entered in books of accounts) is also required.

8. Details of transfer of cenvat credit for registered person having centralized registration under existing law (Section 140(8))

						- CTITIO	
Sl. No.	Registration no.	Tax period to	Date of filing	Balance eligible	GSTIN of receivers	Distributi	on docume
	under existing	which the last	of the return	cenvat credit	(same PAN) of ITC	/in	voice
	law	return filed under	specified in	carried forward	CENTRAL TAX	N.T.	ъ.
	(Centralized)	the existing law	Column no. 3	in the said last		No.	Date
		pertains		return			
1	2	2	1	5	6	7	8
1	2	3	4	3	O	/	o
	Total						



- 9. Details of goods sent to job-worker and held in his stock on behalf of principal under section 141
- a. Details of goods sent as principal to the job worker under section 141

Sr.	Challan	Challan	Type of goods	Details of goods with job- worker					
No.	No.	date	(inputs/ semi-finished/ finished)	HSN	Description	Unit	Quantity	Value	
1	2	3	4	5	6	7	8	9	
GSTIN	of Job Worke	er, if available							
	Total								

b. Details of goods held in stock as job worker on behalf of the principal under section 141

Sr. No.	Challan	Challan	Type of goods	Details of goods with job- worker				
	No.	Date	(inputs/ semi-finished/ finished)	HSN	Description	Unit	Quantity	Value
1	1 2 3		4	5	6	7	8	9
GSTIN	GSTIN of Manufacturer							
	Total							

- 10. Details of goods held in stock as agent on behalf of the principal under section 142 (14) of the SGST Act
- a. Details of goods held as agent on behalf of the principal

Sr.	GSTIN of Principal		Details of goods with Agent							
No.		Description	Input Tax to be taken							
1	2	3	4	5	6	7				

b. Details of goods held by the agent

Sr.	GSTIN of Principal		Details of goods with Agent							
No.		Description	Description Unit Quantity Value Input Tax to be tall							
1	2	3	4	5	6	7				



			•	ST PRACTI

11. Details of credit availed in terms of Section 142 (11 (c))

Sr. no	Registration No of VAT	Service Tax Registration No.	Invoice/doc ument no.	Invoice/ document date	Tax Paid	VAT paid Taken as SGST Credit or Service Tax paid as Central Tax Credit
1	2	3	4	5	6	7
			Total			

12. Details of goods sent on approval basis six months prior to the appointed day (section 142(12))

	Document	Document	GSTIN no. of	Name & address of	Details of goods sent on approval basis					
	no.	date	recipient, (if applicable)	recipient	HSN	Description	Unit	Quantity	Value	
1	2	3	4	5	6	7	8	9	10	
	Total									

Verification (by authorized signatory)

I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom

	Signature
Place	Name of Authorized Signatory
Date	
	Designation / Status

# <sup>@</sup>[Instructions:

- 1. Central Tax credit in terms of sub-section (9) of section 140 of the CGST Act, 2017 shall be availed in column 6 of table 5 (a).
- Registered persons availing credit through Credit Transfer Document (CTD) shall also file FORM
   GST TRAN-3 besides availing credit in table 7A under the heading "inputs.]



<sup>\*</sup>Substituted by Notification No. 1385-F.T. dated 01.08.2017 w.e.f. 01.07.2017.

<sup>\*</sup>Substituted by Notification No. 1456-F.T. dated 17.08.2017 w.e.f. 01.07.2017.

<sup>&</sup>lt;sup>®</sup> Inserted by Notification No. 1456-F.T. dated 17.08.2017 w.e.f. 01.07.2017.



#### Form GST TRAN - 2

[See Rule 117(4)]

- 1. GSTIN -
- 2. Name of Taxable person -
- 3. Tax Period: month..... year.....

4. Details of inputs held on stock on appointment date in respect of which he is not in possession of any invoice/document evidencing payment of tax carried forward to Electronic Credit ledger.

11110100/40	ocument evi	acmening	paymen	t of tax car	iica ioi wa	ia to Electro	me crean	reager.
Opening stock f		Out	Closing balance					
#HSN as applicable	Unit	Qty.	Qty	Value	Central Tax	Integrated Tax	ITC allowed	Qty
1	2	3	4	5	6	7	8	9

5. Credit on State Tax on the stock mentioned in 4 above (*To be there only in States having VAT at single point*)

Opening stock f	or the tax pe	eriod		Outw	ard supply	y made		Closing balance
#HSN as applicable	Unit	Qty.	Qty	Value	State Tax	Integrate d tax	ITC allowed	Qty
1	2	3	4	5	6	7	8	9

Verification (by authorized signatory)

I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom

<sup>\*</sup>Substituted by Notification No. 1385-F.T. dated 01.08.2017 w.e.f. 01.07.2017



(See rule 138)

# E-Way Bill

E-Way Bill No. :

E-Way Bill date :

Generator :

Valid from :

Valid until :

PART	'-A			
A.1	GSTIN of Supplier			
A.2	Place of Dispatch			
A.3	GSTIN of Recipient			
A.4	Place of Delivery			
A.5	Document Number			
A.6	Document Date			
A.7	Value of Goods			
A.8	HSN Code			
A.9	Reason for Transportation			
PART	'-B			
B.1	Vehicle Number for Road			
B.2	Transport Document Number/Defence Vehicle No./Temporary Vehicle Registration No./Nepal or Bhutan Vehicle Registration No.			



#### **Notes:**

- 1. HSN Code in column A.8 shall be indicated at minimum two digit level for taxpayers having annual turnover upto five crore rupees in the preceding financial year and at four digit level for taxpayers having annual turnover above five crore rupees in the preceding financial year.
- 2. Document Number may be of Tax Invoice, Bill of Supply, Delivery Challan or Bill of Entry.
- 3. Transport Document number indicates Goods Receipt Number or Railway Receipt Number or Forwarding Note number or Parcel way bill number issued by railways or Airway Bill Number or Bill of Lading Number.
- 4. Place of Delivery shall indicate the PIN Code of place of delivery.
- 5. Place of dispatch shall indicate the PIN Code of place of dispatch.
- 6. Where the supplier or the recipient is not registered, then the letters "URP" are to be filled-in in column A.1 or, as the case may be, A.3.
- 7. Reason for Transportation shall be chosen from one of the following:-

Code	Description
1	Supply
2	Export or Import
3	Job Work
4	*[SKD or CKD or supply in batches or lots]
5	Recipient not known
6	Line Sales
7	Sales Return
8	Exhibition or fairs
9	For own use
0	Others

<sup>\*</sup>Substituted by Notification No. 281-F.T. dated 07.03.2018 and came into force from 01.04.2018 vide Notification No. 356-F.T. dated 23.03.2018.

<sup>\*</sup>Substituted by Notification No. 1339-F.T. dated 13.09.2018 w. e. f. 04.09.2018 for "SKD or CKD".



(See rule 138)

# **Consolidated E-Way Bill**

Consolidated E-Way Bill No. :  Consolidated E-Way Bill Date :				
Vehicle Number	:			
Number of E-Way Bills				
E-Way Bill Nu	ımber			
<u>-                                    </u>	·	·		

<sup>\*</sup>Substituted by Notification No. 281-F.T. dated 07.03.2018 and came into force from 01.04.2018 vide Notification No. 356-F.T. dated 23.03.2018.



(See Rule138C)

# **Verification Report**

Part A	
Name of the Officer	
Place of inspection	
Time of inspection	
Vehicle Number	
E-Way Bill Number	
Tax Invoice or Bill of Supply or Delivery Challan or Bill of Entry Date	
Tax Invoice or Bill of Supply or Delivery Challan or Bill of Entry Number	
Name of person in-charge of vehicle	
Description of goods	
Declared quantity of goods	
Declared value of goods	
Brief description of the discrepancy	
Whether goods were detained?	
If not, date and time of release of vehicle	
Part B	
Actual quantity of goods	
Actual value of the Goods	
Tax payable	
Integrated tax	
Central tax	
State or Union territory tax	
Cess	

Penalty payable	
Integrated tax	
Central tax	
State or Union territory tax	
Cess	
Details of Notice	
Date	
Number	
Summary of findings	

<sup>\*</sup>Substituted by Notification No. 281-F.T. dated 07.03.2018 and came into force from 01.04.2018 vide Notification No. 356-F.T. dated 23.03.2018.



(See Rule138D)

# Report of detention

E-Way Bill Number	
Approximate Location of detention	
Period of detention	
Name of Officer in-charge	(if known)
Date	
Time	

<sup>\*</sup>Substituted by Notification No. 281-F.T. dated 07.03.2018and come into force from 01.04.2018vide Notification No. 356-F.T. dated 23.03.2018.



[See rule 138 E]

#### Application for unblocking of the facility for generation of E-Way Bill

	7 LP	pheation for unbiocking of the	ic facility for generation of L-way Din
1	GSTIN	<auto></auto>	
2	Legal Name	<auto></auto>	
3	Trade Name	<auto></auto>	
4	Address	<auto></auto>	
5	Part A of F	urnishing of information in ORM GST EWB 01 (i.e. generation of E-Way Bill)	<auto></auto>
6	Reasons of generation of	unblocking of facility for E- Way Bill	<user input=""></user>
(i)			
(ii)			
(iii)			
7	Expected date period under	e for filing of returns for the default	<user input=""></user>
8. Verification  I hereby solemnly affirm and declare that the information given hereinabove is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.			
			Signature of Authorised Signatory
			Name
			Designation /Status
Date:			
Place:			

<sup>\*</sup> Form GST EWB-05 has been inserted by Notification No. 1225-F.T. dated 19.07.2019.



[See rule 138 E]

Reference No.:	Date:
То	
GSTIN	
Name	
Address	
Order for permitting / rejecting application fo	r unblocking of the facility for generation of E-Way Bill
Application ARN:	Date:
The facility for generation of E- Way Bill was blow.e.f in terms of rule 138E of the West Be	ocked in respect of the aforementioned registered person engal Goods and Services Tax Rules, 2017.
I have carefully considered the facts of the case a aforementioned registered person.	nd the application / submissions made by the
I hereby accept the application and order for unbl following grounds:	ocking of the facility for generation of E-Way Bill on the
1. 2.	
Please note that the system will block the facility	for generation of E-Way Bill after(date) if the ns of rule 138E of the West Bengal Goods and Services
OR	
I have carefully considered the facts of the case a aforementioned registered person.	nd the application / submissions made by the
I hereby reject the application for unblocking the grounds:	facility for generation of E-Way Bill on following
1.	
2.	
Signature: Name: Designation: Jurisdiction: Address:	
Note: Separate document may be attached for det	tailed order / reason(s).
	_

<sup>\*</sup> Form EWB-06 has been inserted by Notification No. 1225-F.T. dated 19.07.2019.



### \*FORM GST INV - 1

(See Rule 48)

#### Format/Schema for e-Invoice

Note 1: Cardinality means whether reporting of the item(s) is mandatory or optional as explained below:

- **0..1**: It means that reporting of item is optional and when reported, the same cannot be repeated.
- 1..1: It means that reporting of item is mandatory but cannot be repeated.
- **1..n**: It means that reporting of item is mandatory and can be repeated more than once.
- **0..n**: It means that reporting of item is optional but can be repeated more than once if reported. For example, *previous invoice reference is optional but if required one can mention many previous invoice references*.

Note 2: Field specification Number (Max length: m, n) indicates 'm' places before decimal point and 'n' places after decimal point. For example, Number (Max length: 3,3) will have the format 999.999

	Schema (Version 1.1)										
Sr. No.	Technical name of the field	Cardi nality (01/ 11/ 0n/ 1n)	Brief  Description of the field	Whethe r Mandat ory/ Optiona	Technical Field Specification	Sample Value of the field	Explanatory Notes				
1.	Basic Details	11		Mandat ory			Header for Basic Details				
1.0	Version	11	Version Number	Mandato ry	String (Max. Length:6)	1.1	This is version of the e- invoice schema. It will be used to keep track of version of Invoice specification.				
1.1	IRN	11	Invoice Reference Number	Mandato ry	String (Length: 64)	a5c12dca8 0e7433217 ba4013 750f2046f 229	This will be a unique reference number for the invoice.				
							However, the supplier will not be populating this field.				
							The registration request may not have this field populated.				
							The Invoice Registration Portal (IRP) will generate this IRN and respond to the				

							FRAC
							registration request.
							e-invoice is valid only when it has the IRN. Hence, this is marked as mandatory field.
1.2	Supply_Ty pe_Code	11	Code for Supply Type	Mandato ry	Enumerated List	B2B/B2C/ SEZWP/S EZWOP/E XP	This will be the code to identify type of supply.
						WP/EXP WOP/DE XP	B2B: Business to Business
						Ar	B2C: Business to Consumer
							SEZWP: To SEZ with Payment
							SEZWOP: To SEZ without Payment
							EXPWP: Export with Payment
							EXPWOP: Export without Payment
							DEXP: Deemed Export
1.3	Document_ Type_Code	11	Code for Document	Mandato ry	Enumerated List	INV / CRN / DBN	Type of Document:
			Туре				INV for Invoice,
							CRN for Credit Note,
							<b>DBN</b> for Debit note.
1.4	Document_ Num	11	Document Number	Mandato ry	String (Max Length:16)	Sa/1/2019	This is as per relevant rule in CGST/SGST/UTGST Rules.

							PRAC
1.5	Document_ Date	11	Document Date	Mandato ry	String	21/07/201 9	The date on which the Invoice was issued. Format
					(DD/MM/YYYY)		"DD/MM/YYYY"
1.6	Additional_ Currency_ Code	01	Additional Currency Code	Optional	Enumerated List	USD, EUR	The field is for reporting additional currency, if any, in which all invoice amounts can be given, along with INR.
							One such additional currency may be used in the invoice, as per list published under ISO 4217 standard.
							List published and updated from time to time at <a href="https://www.icegate.gov.i">https://www.icegate.gov.i</a> <a href="https://www.icegate.gov.i">n/Webappl/CUR_ENQ</a>
1.7	Reverse_C harge	01	Reverse Charge	Optional	String (Length:1)	Y	Whether the tax liability payable is under Reverse Charge.
1.8	IGST_Appl icability_de spite_Suppl ier_and_Re cipient_loc ated_in_sa me_ State/UT	01	IGST Applicability despite Supplier and Recipient located in same State/UT	Optional	String (Length: 1)	N	To report the scenarios where the supply is chargeable to IGST despite the fact that the Supplier and Recipient are located within same State/UT
2.	Document _Period	01		Optiona 1			Header for Document Period
2.1	Document_ Period_Star t _Date	11	Document Period Start Date	Mandato ry	String (DD/MM/YYYY)	21/07/201	This is the start date of the document period (delivery/invoice period).
							(This field is mandatory only if this section is selected)
2.2	Document_ Period_End _ Date	11	Document Period End Date	Mandato ry	String (DD/MM/YYYY)	21/07/201	This is the end date of the document period (delivery/invoice period).

	1		1	1		ı	PRAC
							(This field is mandatory only if this section is selected)
3.	Preceding Document / Contract Reference	01		Optiona l			Header for Preceding Document / Contract Reference
3.1	Preceding Document Reference	0n		Optiona I			Sub-header for Preceding Document Reference
3.1.1	Preceding_ Document_ Number	11	Preceding Document Number	Mandat	String (Max length:16)	Sa/1/2019	This is the reference of original document/invoice to be provided optionally in the case of debit or credit notes.  Credit/Debit notes, against invoices can also be referred here.  (This field is mandatory only if this section is selected)
3.1.2	Preceding_ Document_ Date	11	Date of Preceding Document	Mandator y	String (DD/MM/YYYY)	21/07/20 19	Date of preceding document/invoice.  (This field is mandatory only if this section is selected)
3.1.3	Other_ Reference	01	Other Reference	Optional	String (Max length:20)	KOL01	This field is to provide any additional reference e.g. specific branch, their user ID, their employee ID, sales centre reference etc.
3.2	Receipt / Contract References	0n		Optional			Sub-header for Receipt / Contract References

							***************************************
3.2.1	Receipt_Ad vice_Refere nce	01	Receipt Advice Reference	Optional	String (Max length:20)	CREDIT30	This reference is kept for user to provide number of their receipt advice to their customer, in lieu of advance.
3.2.2	Receipt_Ad vice _Date	01	Date of Receipt Advice	Optional	String (DD/MM/YYYY)	21/07/2019	Date of issue of receipt advice for advance.
3.2.3	Tender_or_ Lot_Referen ce	01	Tender or Lot Reference	Optional	String (Max length:20)	TENDERJ AN2020	This reference is kept for mentioning number or details of Lot or Tender, if supplies are made under such Lot or tender.
3.2.4	Contract_Re ference	01	Contract Reference	Optional	String (Max length:20)	CONT2307 2019	This reference is kept for mentioning contract number, if supplies are made under any specific Contract
3.2.5	External_R eference	01	External Reference	Optional	String (Max length:20)	EXT23222	An additional field for provision of any additional/external reference number for the supply.
3.2.6	Project_Ref erence	01	Project Reference	Optional	String (Max length:20)	PJTCODE 01	This reference is kept for mentioning project number, if supplies are made under any specific project
3.2.7	PO _Ref_Num	01	PO Reference Number	Optional	String (Max length:16)	Vendor PO /1	This is the reference number of Purchase Order
3.2.8	PO_Ref_D ate	01	PO Reference Date	Optional	String (DD/MM/YYYY)	21/07/201	This is the date of Purchase Order.
4.	Supplier Informatio n	11		Mandat ory			Header for Supplier Information
4.1	Supplier_L egal_Name	11	Supplier Legal Name	Mandato ry	String (Max. length:100)	XYZ Ltd.	Legal Name, as appearing in PAN of the Supplier
4.2	Supplier_Tr ade_ Name	01	Trade Name of Supplier	Optional	String (Max length:100)	ABC Traders	A name by which the Supplier is known, i.e. Business Name, other than legal name
4.3	Supplier_ GSTIN	11	GSTIN of Supplier	Mandato ry	String (Length:15)	29AADFV 7589C1ZX	GSTIN of the Supplier

4.4	Supplier_ Address1	11	Supplier Address 1	Mandato ry	String (Max length:100)	# 1-23- 120, Flat No. 3, Nalanda Apartment s, MG Road, Vasanth Nagar	Address 1 of the Supplier (Building/Flat no., Road/Street, Locality etc.)
4.5	Supplier_ Address2	01	Supplier Address 2	Optional	String (Max length:100)	# 1-23- 120, Flat No. 3, Nalanda Apartment s, MG Road, Vasanth Nagar	Address 2 of the Supplier (Building/Flat no., Road/Street, Locality etc.), if any
4.6	Supplier_Pl ace	11	Supplier Place	Mandato ry	String (Max length:50)	Bangalore	Location of the Supplier (City/Town/Village)
4.7	Supplier_St ate_Code	11	Supplier State Code	Mandato ry	Enumerated List	29	State Code of the Supplier as per GST System  List published and updated from time to time at <a href="https://www.icegate.gov.in/Webappl/STATE_EN">https://www.icegate.gov.in/Webappl/STATE_EN</a> Q
4.8	Supplier_Pi ncode	11	Supplier PIN Code	Mandato ry	Number (Length: 6)	560087	PIN Code of the Supplier Locality
4.9	Supplier_ Phone	01	Supplier Phone	Optional	String (Max length:12)	999999999	Contact number of the Supplier
4.10	Supplier_E mail	01	Supplier e- mail	Optional	String (Max length:100)	supplier@ abc.com	e-mail ID of the Supplier, as per REGEX (Regular Expressions) pattern
5.	Recipient Informatio n	11		Mandat ory			Header for Recipient Information

Legal_Nam e Legal Name ry length:100)  Ltd.  5.2 Recipient_ Trade_Nam e length:100)  5.3 Recipient_ GSTIN  Cost of Recipient ry  Ltd.  Optional String (Max length:100)  Mandato String (Length:15) 29ABCCR 1832C1ZX ry  URP  5.4 Place_Of_S 11 Place of Mandato Enumerated List 29, 96	PRA
Trade_Nam e Trade Name length:100)  5.3 Recipient_ GSTIN	It will be legal name of recipient, as per PAN.
GSTIN Recipient ry 1832C1ZX , URP  5.4 Place_Of_S upply_State Supply (State ry )	It will be trade name of recipient, if available.
upply_State   Supply (State   ry	GSTIN of the Recipient, if available.  URP: In case of exports or if supplies are made to unregistered persons
	Code/State Code of Place of Supply as per GST System.  List published and updated from time to time at <a href="https://www.icegate.gov.in/Webappl/STATE_EN">https://www.icegate.gov.in/Webappl/STATE_EN</a> Q
Address 1 ry length: 100) 120, Flat No. 3.	Address 1 of the Recipient (Building/Flat no., Road/Street, Locality etc.)
Address 2 length:100) 120, Flat No. 3, Nalanda Apartment	Address 2, if any, of the Recipient (Building/Flat no., Road/Street, Locality etc.), if any
Place Place rv	Location of the Recipient (City/Town/Village)

5.8	Recipient_ State_Code	11	Recipient State Code	Mandato ry	Enumerated List	29	Code/State Code of the Recipient.
							List published and updated from time to time at <a href="https://www.icegate.gov.i">https://www.icegate.gov.i</a> <a href="https://www.icegate.gov.i">n/Webappl/STATE_EN</a>
							Q
5.9	Recipient _Pincode	01	Recipient PIN Code	Optional	Number (Length: 6)	560002	PIN code of the Recipient locality.
							In case of export, Pincode need not be mentioned.
5.10	Country_C ode_of_Ex port	01	Country Code of Export	Optional	Enumerated List	AN	Code of country of export as per ISO 3166-1 alpha-2 / Indian Customs EDI system.
							List published and updated from time to time at <a href="https://www.icegate.gov.i">https://www.icegate.gov.i</a> <a href="n/Webappl/COUNTRY">n/Webappl/COUNTRY</a> <a href="ENQ">ENQ</a>
5.11	Recipient_ Phone	01	Recipient Phone	Optional	String (Max length:12)	080222332	Contact number of the Recipient
5.12	Recipient_e mail_ID	01	Recipient e- mail ID	Optional	String (Max length:100)	billing@x yz.com	e-mail ID of the Recipient, as per REGEX (Regular Expressions) pattern
6.	Payee	01		Optiona 1			Header for Payee Information
	Informatio n						
6.1	Payee_Nam e	01	Payee Name	Optional	String (Max length:100)	Ramesh K	Name of the person to whom payment is to be made
6.2	Payee_Ban k_A ccount_Nu	01	Payee Bank Account Number	Optional	String (Max length:18)	386850174 7262	Bank Account Number of Payee

	mber						
	moer						
6.3	Mode_of_P ayment	01	Mode of Payment	Optional	String (Max length:18)	Direct Transfer	Mode of Payment: Cash/Credit/Direct Transfer etc.
6.4	Bank _Branch_C ode	01	Bank Branch Code	Optional	String (Max length:11)	SBIN9876 543	Indian Financial System Code (IFSC) of Payee's Bank Branch
6.5	Payment_T erms	01	Payment Terms	Optional	String (Max length:100)	Text	Terms of Payment, if any, with the Recipient can be provided.
6.6	Payment_In struction	01	Payment Instruction	Optional	String (Max length:100)	Text	Instruction, if any, regarding payment can be provided
6.7	Credit_Tra nsfer_Term s	01	Credit Transfer Terms	Optional	String (Max length:100)	Text	Terms to specify credit transfer payments.
6.8	Direct_Deb it_Terms	01	Direct Debit Terms	Optional	String (Ma x length:100)	Text	Terms, if any, to specify a direct debit.
6.9	Credit_Day s	01	Credit Days	Optional	Numeric (Max length:4)	30	Number of days within which payment is due.
7.	Delivery_I nformation	01		Optiona l			Header for Delivery Information
7.1	Ship_To_D etails	01	Ship To Details	Optional	<u>Refer A</u>	1.0	Details of location to which the supply has to be delivered.
7.2	Dispatch_F rom_Detail s	01	Dispatch From Details	Optional	Refer A	<u>1.1</u>	Details of location from where Supply has to be dispatched.
8.	Invoice Item Details	1n		Man datory			Header for Invoice Item Details
8.1	Item_List	1n	Item List	Mandat ory	Refer A	<u>1.2</u>	Provides information about the goods and services being invoiced.
9.	Document Total	11		Man datory			Header for Document Total Details

9.1	Document_ Total_Deta ils	11	Document  Total Details	Mandat ory	<u>Refer A</u>	1.3	Details of document total including taxes.
10.	Extra Informatio n	01		Option al			Header for Extra Information
10.1	Tax_Schem e	11	Tax Scheme	Mandat ory	String (Max length: 10)	GST	To specify the tax/levy applicable – GST (This field is mandatory only if this section is selected)
10.2	Remarks	01	Remarks	Optional	String (Max length: 100)	New batch Items submitted	A textual note that gives unstructured information that is relevant to the Invoice as a whole e.g. reasons for any correction or assignment note in case the invoice has been factored etc.
10.3	Port_Code	01	Port Code	Optional	Enumerated List	Alpha numeric	In case of export/supply to SEZ, port code can be mentioned as per Indian Customs EDI System (ICES), if applicable and available at the time of reporting e-invoice.  Lists published and updated from time to time at below URLs:
							EDI Port Codes:  https://www.icegate.gov. in/Webappl/LOCATION ENQ  Non-EDI Port Codes: https://www.icegate.gov. in/Webappl/nonlocation _det_all.jsp

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10.4	Shipping_B ill_Number	01	Shipping Bill Number	Optional	String (Max length: 20)	Alpha numeric	In case of export/supply to SEZ, shipping bill number as per Indian Customs EDI System (ICES), can be mentioned, if applicable and available at the time of reporting e-invoice.
10.5	Shipping_B ill_Date	01	Shipping Bill Date	Optional	String(DD/M M/YYYY)	03/12/2020	Date of Shipping Bill as per Indian Customs EDI System (ICES)
10.6	Export_Dut y_Amount	01	Export Duty Amount	Optional	Number (Max Length: 12,2)	1200000.50	Amount of Export Duty in INR, if any, applicable (in case of invoices for export)
10.7	Supplier_C an_Opt_Re fund	01	Supplier Can Opt Refund	Optional	String (Length: 1)	Y/N	In case of deemed export supplies, this field is for mentioning whether supplier can exercise the option of claiming refund or not.
10.8	ECOM_GS TIN	01	e-Commerce Operator's GSTIN	Optional	String (Length: 15)	29ABCCR1 832C1CX	GSTIN of e-commerce operator, if supply is made through him/her.
11.	Additional _Supporti ng_Docum ents	0n		Optiona 1			Header for Additional Supporting Documents
11.1	Additional_ Supportin g_Docume nts_URL	01	Additional Supporting Documents URL	Optional	String (Max length: 100)	http://www.x yz.com/abc	This is to enter URL reference of additional supporting documents, if any.
11.2	Additional_ Supporting	01	AdditionalSup porting	Optional	String	Base 64 encoded	This is to add any additional document in
	_Document s_base64		Document in base64		(Max length: 1000)	Document	PDF/Microsoft Word in Base64 encoded format.

12.	E-way Bill Details	01		Optiona 1			Header for e-way Bill Details
12.1	Transporter _ID	01	Transporter ID	Option al	String (Length: 15)	29AADFV75 89C1ZO	Registration / Enrolment Number of the transporter
							(This field is required if Part-A of E-waybill has to be generated)
12.2	Trans_Mod e	01	Mode of Transportation	Optional	Enumerated List	1/2/3/4	Option to be provided based on mode of transport available on e-Way Bill Portal
							1 for Road;
							2 for Rail;
							3 for Air;
							4 for Ship
							(This field is required if Part-B of e-way bill is also to be generated)
12.3	Trans_Dista	11	Distance of Transportation	Mandato ry	Number (Max length: 4)	200	Distance of Transportation
							(This field is mandatory only if this section is selected)
12.4	Transporter _Name	01	Transporter Name	Optional	String (Max length: 100)	Sphurthi Transporters	Name of the Transporter
12.5	Trans_Doc _No.	01	Transport Document Number	Optional	String (Max length: 15)	As/34/746	Transport Document Number
							(This field is mandatory if mode of Transport is Rail or Air or Ship)

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12.6	Trans_Doc _Date	01	Transport Document Date	Optional	String (DD/MM/YYYY)	21/07/2019	Date of Transport document.
							(This field is mandatory if mode of Transport is Rail or Air or Ship)
12.7	Vehicle_No	01	Vehicle Number	Optional	String (Max. length: 20)	KA12KA123 4 or KA12K1234 or	Vehicle Registration Number
						KA123456 or KAR1234	(This field is mandatory if mode of Transport is Road)
12.8	Vehicle_Ty pe	01	Vehicle Type	Optional	Enumeration List	O/R	To mention nature of vehicle:
							O: Over-Dimensional Cargo
							R: Regular
							(This field is mandatory if Part-B of e-way bill is also to be generated)
A 1.0	Ship To Details	01		Optiona l			Header for Annexure A 1.0: Ship To Details
Sr. No.	Parameter Name	Cardi nality	Description	Whethe r optional or mandat ory	Field Specifications	Sample Value	Explanatory Notes
A.1.0 .1	ShipTo_Le gal_Name	11	Ship To Legal Name	Mandato ry	String (Max length: 100)	ABC-1 Ltd.	Legal Name of the entity to whom the supplies are shipped to.
							(This field is mandatory only if this section is selected)
A.1.0 .2	ShipTo_Tra de_Name	01	Ship To Trade Name	Optional	String (Max length: 100)	XYZ-1	Trade Name of the entity to whom the supplies are shipped to.

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A.1.0 .3	ShipTo_GS TIN	01	Ship To GSTIN	Optional	String (Length: 15)	36AABCT22 23L1ZF	GSTIN of the entity to whom the supplies are shipped to.
A.1.0 .4	ShipTo_Ad dress1	11	Ship To Address1	Mandato ry	String (Max length: 100)	Flat No. 2, Priya Towers, Omega Road, Srinivasa Nagar	Address 1 of the entity to whom the supplies are shipped to  (This field is mandatory only if this section is selected)
A.1.0 .5	ShipTo_Ad dress2	01	Ship To Address2	Optional	String (Max length: 100)	Flat No. 2, Priya Towers, Omega Road, Srinivasa Nagar	Address 2, if any, of the entity to whom the supplies are shipped to
A.1.0 .6	ShipTo_Pla ce	11	Ship To Place	Mandato ry	String (Max length: 100)	Bangalore	Place (City/Town/Village) of entity to whom the supplies are shipped to.  (This field is mandatory only if this section is selected)
A.1.0 .7	ShipTo_Pin code	11	Ship To Pincode	Mandato ry	Number (Max length: 6)	560001	PIN code of the location to which the supplies are shipped to.  (This field is mandatory only if this section is selected)
A.1.0 .8	Ship_To_St ate_Code	11	Ship To State Code	Mandato	Enumerated List	29	Code/State Code (as per GST System) to which the supplies are shipped to.  List published and updated from time to time at <a href="https://www.icegate.gov.in/Webappl/STATE_EN">https://www.icegate.gov.in/Webappl/STATE_EN</a> Q  (This field is mandatory only if this section is

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							selected)
A 1.1	Dispatch From Details	01		Optional			Header for Annexure A 1.1: Dispatch From Details
Sr. No.	Parameter Name	Cardi nality	Description	Whethe r mandat ory or optional	Field Specific ations	Sample Value	Explanatory Notes
A.1.1 .1	DispatchFr om_Name	11	Dispatch From Name	Mandato ry	String (Max length:100)	XYZ-2	Name of the entity from which goods are dispatched.  (This field is mandatory only if this section is selected)
A.1.1 .2	DispatchFr om_Addres s1	11	Dispatch From Address1	Mandato ry	String (Max length: 100)	Building No. 4/2, Flat No. 3, Kakatiya Apartments, Vasanth Nagar	Address 1 of the entity from which goods are dispatched.  (This field is mandatory only if this section is selected)
A.1.1 .3	DispatchFr om_Addres s2	01	Dispatch From Address2	Optional	String (Max length: 100)	Building No. 4/2, Flat No. 3, Kakatiya Apartments, Vasanth Nagar	Address 2 of the entity from which goods are dispatched.
A.1.1 .4	DispatchFr om_Place	11	Dispatch From Place	Mandato ry	String (Max length: 100)	Bangalore	Place (City/Town/Village) of the entity from which goods are dispatched.  (This field is mandatory only if this section is selected)
A.1.1 .5	DispatchFr om_State_ Code	11	Dispatch From State Code	Mandato ry	Enumerated List	29	Code/State Code of the entity (as per GST System), from which goods are dispatched.

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							List published and updated from time to time at <a href="https://www.icegate.gov.">https://www.icegate.gov.</a> <a href="in/Webappl/STATE">in/Webappl/STATE</a> EN <a href="Q">Q</a>
							(This field is mandatory only if this section is selected)
A.1.1 .6	DispatchFr om_Pincod e	11	Dispatch From Pincode	Mandato ry	Number (Length: 6)	560087	Pincode of the locality of entity from where goods are dispatched.
							(This field is mandatory only if this section is selected)
A 1.2	Item Details	1n		Mandat ory			Header for Annexure A 1.2: Item Details
Sr.	Parameter	Cardi	Description	Whethe	Field	Sample	Explanatory Notes
No.	Name	nality	·	r mandat ory or optional	Specifications	Value	
	Name Sl_No.		Serial Number	mandat ory or		_	Serial number of the item
No. A.1.2		nality	Serial	mandat ory or optional	Specifications  String (Max	Value	
No. A.1.2 .1 A.1.2	Sl_No.  Item_Descr	nality	Serial Number	mandat ory or optional Mandato ry	String (Max length: 6) String (Max	Value	Serial number of the item
No.  A.1.2 .1  A.1.2 .2  A.1.2	Sl_No.  Item_Description	11 01	Serial Number Item Description	mandat ory or optional  Mandato ry  Optional	Specifications  String (Max length: 6)  String (Max length: 300)	Value  1,2,3  Mobile	Serial number of the item  Description of the item  Specify whether supply is
A.1.2 .1 A.1.2 .2 A.1.2 .3	Sl_No.  Item_Description  Is_Service	11 01	Serial Number Item Description Service	mandat ory or optional  Mandato ry  Optional  Mandato ry  Mandato	Specifications  String (Max length: 6)  String (Max length: 300)  String (Length: 1)  String (Max	Value  1,2,3  Mobile  Y/N	Serial number of the item  Description of the item  Specify whether supply is service or not.  To enter applicable HSN / SAC Code of Goods /

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A.1.2 .7	Quantity	01	Quantity	Optional	Number (Max length: 10,3)	10	The quantity of items to be mentioned in the invoice.
							This is mandatory only in case of goods.
A.1.2 .8	Free_Qty	01	Free Quantity	Optional	Number (Max length: 10,3)	99	Quantity of item(s), if any, given free of charge (FOC)
A.1.2 .9	Unit_Of_M easurement	01	Unit of Measurement	Optional	String (Max length: 8)	Box	The Unit of Measurement (UOM), if any, applicable on invoiced goods.
A.1.2 .10	Item_Price	11	Item Price	Mandato ry	Number (Max length: 12,3)	500.5	Price per unit item.
A.1.2 .11	Gross_Amo unt	11	Gross Amount	Mandato ry	Number (Max length: 12,2)	5000	The gross price of an item (cost multiplied by quantity - rounded off to 2 decimal), exclusive of taxes.
A.1.2 .12	Item_Disco unt_Amoun t	01	Item Discount Amount	Optional	Number (Max length: 12,2)	10.25	Discount amount, if any, for the item.
A.1.2 .13	Pre_Tax_V alue	01	Pre-Tax Value	Optional	Number (Max length: 12,2)	99.00	If pre-tax value is different from taxable value, mention the pre-tax value and taxable values separately.
							In some cases, the pre-tax value may be different from taxable value.
							For example, where old goods are exchanged for new ones (e.g. new phone supplied for INR 20,000 along with exchange of old phone, then pre-tax value would be INR 20,000 and taxable value would be INR 24,000, assuming exchange value of old phone is 4,000.
							Another example is in the case of real estate where

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							pre-tax value may be different from taxable value.
A.1.2	Item_Taxab	11	Item Taxable	Mandato	Number	5000	This is the value on which
.14	le_Value		Value	ry	(Max length: 12,2)		tax is computed. Value cannot be negative.
A.1.2 .15	GST_Rate	11	GST Rate	Mandato ry	Number (Max	5	The GST rate, represented as percentage that applies to
.13				Ty	length: 3,3)		the invoiced item. It will be IGST rate or sum of CGST & SGST Rates.
A.1.2	IGST_Amt	01	IGST Amount	Optional	Number	999.45	Amount of IGST payable
.16					(Max Length:		per item (rounded off to 2 decimals). If IGST is
					12,2)		reported, then CGST & SGST/UTGST will be blank. For taxable supplies,
							either IGST or CGST
							&SGST/UTGST should be reported.
A.1.2 .17	CGST_Amt	01	CGST Amount	Optional	Number	650.00	Amount of CGST payable per item (rounded off to 2
.17					(Max Length: 12,2)		decimals).
							If CGST is reported, then
							SGST/UTGST has to be reported and IGST will be blank.
A.1.2 .18	SGST_UT GST Amt	01	SGST/UTGST Amount	Optional	Number (Max length: 12,2)	650.00	Amount of SGST/UTGST payable per item(rounded
.10	OST 7Mill		Timount		rengui. 12,2)		off to 2 decimals).
							If SGST/UTGST is
							reported, then CGST must be reported and IGST will be blank.
A1.2.	Comp_Cess	01	Compensation	Optional	Number	2.5%	Ad valorem Rate of GST
19	_Rate_Ad_ valorem		Cess Rate, Ad_Valorem		(Max length: 3,3)		Compensation Cess, applicable, if any
A1.2. 20	Comp_Cess _Amt_	01	Compensation Cess Amount,	Optional	Number	56.00	GST Compensation Cess amount, ad valorem
	Ad_Valore m		Ad Valorem		(Max length: 12,2)		(rounded off to 2 decimals) (based on value of the item)
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A1.2. 21	Comp_Cess _Amt_Non _Ad_Valor em	01	Compensation Cess Amount, Non ad valorem	Optional	Number (Max length:12,2)	23.00	GST Compensation Cess amount, computed on the basis other than value of item (i.e. specific cess amount computed based on quantity, number etc.)
A1.2. 22	State_Cess _Rate_ad_v alorem	01	State Cess Rate, Ad Valorem	Optional	Number (Max length: 3,3)	1.5 %	Ad valorem Rate of State/UT Cess, applicable, if any
A1.2. 23	State_Cess _Amt_Ad_ Valorem	01	State Cess Amount, ad valorem	Optional	Number (Max length: 12,2)	43.00	State/UT Cess amount, ad valorem (based on value of the item)
A1.2. 24	State_Cess _Amt_Non _Ad_Valor em	01	State Cess Amount, non ad valorem	Optional	Number (Max length: 12,2)	12.00	State/UT Cess amount, computed on the basis other than value of item (i.e. specific cess amount computed based on quantity, number etc.)
A.1.2 .25	Other_Char ges_Item_L evel	01	Other Charges (item level)	Optional	Number (Max length: 12,2)	874.95	Any other charges applicable at item level.  These may not be part of taxable value, e.g. in case of pure agent reimbursement.
A.1.2 .26	Purchase_O rder_Line_ Reference	01	Purchase Order Line Reference	Optional	String (Max length: 50)	746/ABC/01	Reference of Purchase Order Line
A.1.2 .27	Item_Total _Amt	11	Item Total Amount	Mandato ry	Number (Max length: 12,2)	5000	The item total value that includes all taxes, cesses, as well as other charges.  However, this value excludes discount, if any.
A.1.2 .28	Origin_Cou ntry_Code	01	Code of Country of Origin	Optional	Enumerated List	DZ	This is to specify country of origin of the item, e.g. mobile phone sold in India could be manufactured in other country;  Code of country of export as per ISO 3166-1 alpha-2 / Indian Customs EDI system

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							(ICES).
							List published and updated from time to time at https://www.icegate.gov.in/Webappl/COUNTRY_ENQ
A.1.2 .29	Unique_Se rial_Numb er	01	Unique Serial Number	Optional	String (Max length: 20)	553	Serial number, in case of each item having a unique number.
A.1.2 .30	Product_At tribute_Det ails	0n	Optional		<u>Refer A 1.5</u>		Attribute details of product
A 1.3	Document Total Details	11		Mand atory			Header for Annexure A 1.3: Document Total Details
Sr. No.	Parameter Name	Cardi nality	Description	Wheth er manda tory or option al	Field Specific ations	Sample Value	Explanatory Notes
A.1.3 .1	Taxable_V alue_Total	11	Total Taxable Value	Manda tory	Number (Max length: 14,2)	768439.35	This is the sum of the taxable values of all the items in the document.
A.1.3 .2	IGST_Amt _Total	01	Total IGST Amount	Option al	Number (Max length: 14,2)	265.50	Total IGST amount for the invoice.
							Appropriate taxes based on rule will be applicable.
							For example, either of CGST & SGST/UTGST or IGST will be mandatory.
							As this is conditional mandatory, it is marked as 'optional'

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A.1.3 .3	CGST_Am _Total	01	Total CGST Amount	Option al	Number (Max length: 14,2)	65.45	Total CGST amount for the invoice.
							Appropriate taxes based on rule will be applicable.
							For example, either of CGST & SGST/UTGST or IGST will be mandatory.
							As this is conditional mandatory, it is marked as 'optional'
A.1.3 .4	SGST_UT GST_Amt _Total	01	Total SGST/UTGS T	Option al	Number (Max length: 14,2)	65.45	Total SGST/UTGST amount for the invoice.
			Amount				Appropriate taxes based on rule will be applicable. For example, either of CGST & SGST/UTGST or IGST will be mandatory.
							As it is conditional mandatory, it is marked as 'optional'
A.1.3 .5	Comp_Ces s_Amt_Tot al	01	Total Compensation Cess Amount	Option al	Number (Max length: 14,2)	24.95	Total GST Compensation Cess amount for the invoice (ad valorem as well as non-ad valorem)
A.1.3 .6	State_Cess _Amt_Tota 1	01	Total State Cess Amount	Option al	Number (Max length: 14,2)	5.45	Total State cess amount for the invoice (ad valorem as well as non-ad valorem)
A.1.3.7	Discount_ Amt_Invoi ce_Level	01	Invoice Level Discount Amount	Option al	Number (Max length: 14,2)	100.00	This is Discount Amount, if any, applicable on total invoice value
A.1.3.8	Other_Cha rges_Invoi ce_Level	01	Other Charges (Invoice Level)	Option al	Number(Max length: 14,2)	200.00	This is Other charges, if any, applicable on total invoice value
A.1.3.9	Round_Off _Amount	01	Round Off Amount	Option al	Number (Max length: 2,2)	31.21	This is round off amount of total invoice value

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A.1. 3.10	Total_Invo ice_Value_ INR	11	Total Invoice Value in INR	Manda tory	Number (Max length: 14,2)	745249678.5 0	The total value of invoice including taxes/GST and rounded to two decimals maximum.
A.1. 3.11	Total_Invo ice_Value_ FCNR	01	Total Invoice Value in FCNR	Option al	Number (Max length: 14,2)	\$5729.65	The total value of invoice in Additional Currency
A.1.3. 12	Paid_Amou nt	01	Paid Amount	Option al	Number (Max length:14,2)	8463.50	The amount, if any, which has been paid in advance.  It must be rounded to maximum 2 decimals.
A.1.3. 13	Amount_D ue_	01	Amount Due	Option al	Number (Max length:14,2)	98789.50	The outstanding amount due for payment. It must be rounded to maximum 2 decimals.
A 1.4	Batch Details	01		Optio nal			Header for Annexure A 1.4: Batch Details
Sr. No.	Parameter Name	Cardi nality	Description	Wheth er mand atory or option al	Field Specific ations	Sample Value	Explanatory Notes
A.1.4 .1	Batch_Nu mber	11	Batch Number	Manda tory	String (Max Length: 20)	673927	Certain set of manufacturers may mention batch number details. (This field is mandatory only if this section is selected)
A.1.4 .2	Batch_Exp iry_ Date	01	Batch Expiry Date	Option al	String (DD/MM/YYYY)	21/11/2019	Expiry Date of the Batch, if any
A.1.4 .3	Warranty_ Date	01	Warranty Date	Option al	String (DD/MM/YYYY)	21/11/2019	Warranty date for the Item, if any.
						L	Header for Annexure A

g	Item	G 1	· · ·	***	T: 11 C - '0'	G 1	Item
Sr. No.	Parameter Name	Cardi nality	Description	Wheth er mand atory or option al	Field Specific ations	Sample Value	Explanatory notes
A.1.5 .1	Attribute_ Name	01	Attribute Name	Option al	String (Max Length: 100)	Colour	Attribute Name of the item.
A.1.5 .2	Attribute_ Value	01	Attribute Value	Option al	String (Max Length: 100)	Red, green, etc.	Attribute Value of item.

<sup>\*</sup> Substituted by notification No. 654-F.T. dated 18.08. 2020  $\,$  w.e.f. 30.07.2020.



# FORM GST INS-01 AUTHORISATION FOR INSPECTION OR SEARCH

[See rule 139 (1)]

То	
(N	ame and Designation of officer)  Whereas information has been presented before me and I have reasons to believe that—
A.I	M/s
	has suppressed transactions relating to supply of goods and/or services has suppressed transactions relating to the stock of goods in hand, has claimed input tax credit in excess of his entitlement under the Act has claimed refund in excess of his entitlement under the Act has indulged in contravention of the provisions of this Act or rules made thereunder to evade tax under this Act;
	OR
<b>B.</b> ]	M/s
	is engaged in the business of transporting goods that have escaped payment of tax is an owner or operator of a warehouse or a godown or a place where goods that have escaped payment of tax have been stored has kept accounts or goods in such a manner as is likely to cause evasion of tax payable under this Act.
	OR
C.	
	goods liable to confiscation / documents relevant to the proceedings under the Act are secreted in the business/residential premises detailed herein below << Details of the Premises>
Th	erefore,—
	in exercise of the powers conferred upon me under sub-section (1) of section 67 of the Act, I authorize and require you to inspect the premises belonging to the above mentioned person with such assistance as may be necessary for inspection of goods or documents and/or any other things relevant to the proceedings under the said Act and rules made thereunder.

OR

authorize and require you to search the above any goods or documents and/or other things re-	n me under sub-section (2) of section 67 of the Act, I premises with such assistance as may be necessary, and if levant to the proceedings under the Act are found, to seize further action under the Act and rules made thereunder.
relevant to inspection / search operations, make	tamper with the evidence, refusal to answer the questions king of false statement or providing false evidence is the Act read with section 179, 181, 191 and 418 of the
Given under my hand & seal this day of	(month) 20 (year). Valid for day(s).
Seal	
Place	Signature, Name and designation of the issuing authority
Name, Designation & Signature of the Inspection (	Officer/s
(i) (ii)	



## FORM GST INS-02 ORDER OF SEIZURE

[See rule 139 (2)]

Whereas an inspection under sub-section (1)/search under sub-section (2) of Section 67 was conducted by me on// at: AM/PM in the following premise(s):
< <details of="" premises="">&gt;</details>
which is/are a place/places of business/premises belonging to:
< <name of="" person="">&gt;</name>
< <gstin, if="" registered="">&gt; in the presence of following witness(es):</gstin,>

- 1. <<Name and address>>
- 2. <<Name and address>>

and on scrutiny of the books of accounts, registers, documents / papers and goods found during the inspection/search, I have reasons to believe that certain goods liable to confiscation and/or documents and/or books and/or things useful for or relevant to proceedings under this Act are secreted in place(s) mentioned above.

Therefore, in exercise of the powers conferred upon me under sub-section (2) of section 67, I hereby seize the following goods/ books/ documents and things:

#### A) Details of Goods seized:

Sr.	Description	Quantity or units	Make/mark or model	Remarks
No	of goods			
			,	_
1	2	3	4	5



## B) <u>Details of books / documents / things seized</u>:

Sr.	Description	No. of books / documents	Remarks
No	of books / documents / things	/ things seized	
	seized		
		3	1
1	2	3	7

and these goods and or things are being handed over for safe upkeep to:

## <<Name and address>>

with a direction that he shall not remove, part with, or otherwise deal with the goods or things except with the previous permission of the undersigned.

Place:	Name and Designation of the Officer
Date:	

# Signature of the Witnesses

Sr. No.	Name and address	Signature
1.		
2.		

$\sim$	•
,	

<<Name and address>>



## FORM GST INS-03 ORDER OF PROHIBITION

[See rule 139(4)]

Whereas an inspection under sub-section (1)/search under sub-section (2) of Section 67	was
conducted on// at: AM/PM in the following premise(s):	
< <details of="" premises="">&gt;</details>	
which is/are a place/places of business/premises belonging to:	
< <name of="" person="">&gt;</name>	
< <gstin, if="" registered="">&gt;</gstin,>	
in the presence of following witness(es):	
1. < <name address="" and="">&gt;</name>	

and on scrutiny of the books of accounts, registers, documents / papers and goods found during the inspection/search, I have reasons to believe that certain goods liable to confiscation and/or documents and/or books and/or things useful for or relevant to proceedings under this Act are secreted in place(s) mentioned above.

Therefore, in exercise of the powers conferred upon me under sub-section (2) of section 67, I hereby order that you shall not/shall not cause to remove, part with, or otherwise deal with the goods except without the previous permission of the undersigned:

Sr.	Description	Quantity or units	Make/mark or model	Remarks
No	of goods			
1		3	1	5
1	2	3	7	3

Place:

2. <<Name and address>>

Name and Designation of the Officer



Date:
-------

# Signature of the Witnesses

	Name and address	Signature
1.		
2.		

п		
. 1	$\sim$	٠
	ιv	

<<Name and address>>



# FORM GST INS-04 BOND FOR RELEASE OF GOODS SEIZED

[See rule 140(1)]

Iofhereinafter called "obligor(s)" am held and firmly bound to the President of India
(hereinafter called "the President") and/or the Governor of(State) (hereinafter called "the
Governor") in the sum ofrupees to be paid to the President / the Governor for which
payment will be made. I jointly and severally bind myself and my heirs/ executors/ administrators/legal
representatives/successors and assigns by these presents; dated thisday of
WHEREAS in accordance with the provisions of sub-section (2) of section 67, the goods have been seized
vide order number
of tax of rupees. On my request the goods have been permitted to be released
provisionally by the proper officer on execution of the bond of valuerupees and a security
ofrupees against which cash/bank guarantee has been furnished in favour of the
President/ Governor; and
WHEREAS I undertake to produce the said goods released provisionally to me as and when required by the
proper officer duly authorized under the Act.
And if all taxes, interest, penalty, fine and other lawful charges demanded by the proper officer are duly
paid within ten days of the date of demand thereof being made in writing by the said proper officer, this
obligation shall be void.
OTHERWISE and on breach or failure in the performance of any part of this condition, the same shall be in
full force:
AND the President/Governor shall, at his option, be competent to make good all the losses and damages
from the amount of the security deposit or by endorsing his rights under the above-written bond or both;
IN THE WITNESS THEREOF these presents have been signed the day hereinbefore written by the
obligor(s).
Signature(s) of obligor(s).
Date:
Place:



(1) Name and Ado	dress				
(2) Name and Add	dress				
Date					
Place					
Accepted	by	me	this	day	of
(n	nonth)	(year)		(designation of office	cer)for and
on behalf of the P	resident /Governor				
				(Signature of the	ne Officer)

Witnesses



# FORM GST INS-05 ORDER OF RELEASE OF GOODS/ THINGS OF PRISHABLE OR HAZARDOUS NATURE

[See rule 141(1)]

W	hereas the	following	goods	and/or	things	were	seized	on//_	from	the	following
premise(s	):										
<< Details	s of premise	es>>									
which is/a	are a place/p	places of bu	siness/pr	emises	belong	ing to:					
< <name< td=""><td>of Person&gt;</td><td>&gt;</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></name<>	of Person>	>									
< <gsti< td=""><td>N, if registe</td><td>red&gt;&gt;</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></gsti<>	N, if registe	red>>									
Details of	f goods seiz	<u>ed</u> :									
Sr. No		scription goods		Quanti	ty or ur	nits	Make/	mark or mode	el	Rema	arks
1		2			3			4		5	,
	ce these	_	_					nature and ords and dig			mount of n amount
equivalen	t to the:										
	arket price of e amount of	_		_	at is or	may bo	ecome p	oayable			
has been 1	paid, I hereb	y order the	abovem	entione	d goods	s be rel	eased f	orthwith.			
Place:	lace: Name and Designation of the Officer								cer		
Date:											
То:											
< <name< td=""><td>and Designa</td><td>ation&gt;&gt;</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></name<>	and Designa	ation>>									



# **#FORM GST DRC - 01**

[See rule 100 (2) & 142(1)(a)]

Reference No:		Date:
То		
GSTIN/Temp. ID		
Name		
Address		
Tax Period	F.Y	Act -
Section / sub-section under which SCN is being	g issued -	
SCN Reference No	Date	
Sumr	mary of Show Cause Notice	
(a) Brief facts of the case:		
(b) Grounds:		
(c) Tax and other dues:		
	(Amount in Rs.)	

Sr. No.	Tax rate	Turnover	Tax Period		Act	POS (Place of Supply)	Tax	Interest	Penalty	Fee	Others	Total	
			From	То									
1	2	3	4	5	6	7	8	9	10	11	12	13	Ì
													ı

The table has been substituted by notification No. 867-F.T. dated 04.11.2020 w.e.f. 15.10.2020

Total



## Signature

Name

Designation

Jurisdiction

Address

#### Note -

- 1. Only applicable fields may be filled up.
- 2. Column nos. 2, 3, 4 and 5 of the above Table i.e. tax rate, turnover and tax period are not mandatory.
- 3. Place of Supply (POS) details shall be required only if the demand is created under the IGST Act.

<sup>#</sup>Subs. by Notification No. 559-F.T. dated 29.03.2019 w.e.f. 01.04.2019.



# \*FORM GST DRC-01A

## Intimation of tax ascertained as being payable under section 73(5)/74(5)

[See Rule 142 (1A)]

#### Part A

No.:	Date:						
Case ID No.							
To							
GSTIN Address.							
Sub.: Case Proceed reg.	ling Referen	ce No	In	ntimation of lia	bility under s	section 73(5)	)/section 74(5)
Please refer to the all section 73(5) / 74(5) with information, as is given	h reference to	_	-		-		
Act	Period	Tax					]
CGST Act							_
SGST/UTGST Act							-
IGST Act							
Cess							_
Total							_
The grounds and q	uantification	are attach	ned / given belo	ow:			7
You are hereby applicable interest in						-	
You are hereby advisinterest and penalty section 74(1).					_		
In case you wish	to file any su	hmissions	s against the ab	ove ascertainm	ent_the same	may be furr	nished

by..... in Part B of this Form



	Signature
	Name Designation
	Upload Attachment
	Part B
Reply to the communication for	payment before issue of Show Cause Notice
]	[See Rule 142 (2A)]
No.:	Date:
То	
Proper Officer,	
Wing / Jurisdiction.	
	Payment/Submissions in response to liability intimated ction $73(5)/74(5) - reg$ .
Please refer to Intimation ID in respe payable as ascertained under section 73(5) / 74(5) was	ect of Case IDvide which the liability of tax s intimated.
In this regard,	
•	arged partially to the extent of Rs through ling remaining liability are attached / given below:
	OR
B. the said liability is not acceptable and the sub-	missions in this regard are attached / given below:
	Authorised Signatory
	Name
	GSTIN
	Address
	Upload Attachment".

<sup>\*</sup> Inserted by Notification No. 1730-F.T. dated 16.10.2019 w.e.f. 09.10.2019.



[See rule 142(1)(b)]

Reference No:									Ι	Date:		
То												
		GSTI	N/ID									
		Name	;									
		Addre	ess									
Tax Peri	od ·								F.Y. :			
Tax Tem	ou .								1.1			
Section /	sub-s	ection unde	r which	ı state	emen	t is being	issue	d:				
SCN Ref	f. No.				Date	_						
Statemen	nt Ref	. No			Date	; -						
		Summary	of Sta	teme	nt :							
(a) Br	ief fac	cts of the ca	ise:									
(b) G1	round	s:										
(c) Ta	x and	other dues	:									
										(Amo	unt in F	Rs.)
Sr. No.	Tax rate	Turnover	Ta Per		Act	POS (Place of Supply)	Tax	Interest	Penalty	Fee	Others	Total
			From	То								
1	2	3	4	5	6	7	8	9	10	11	12	13

The table has been substituted by notification No. 867-F.T. dated 04.11.2020 w.e.f. 15.10.2020

Total



Name
Designation
Jurisdiction
Address

### Note -

1. Only applicable fields may be filled up.

2. Column nos. 2, 3, 4 and 5 of the above Table i.e. tax rate, turnover and tax period are not mandatory.

Signature

3. Place of Supply (POS) details shall be required only if the demand is created under the IGST Act.

\_\_\_\_\_

<sup>\*</sup> Subs. By Notification No. 559-F.T. dated 29.03.2019 w.e.f. 01.04.2019.



[See rule 142(2) & 142 (3)]

Intimation of payment made voluntarily or made against the show cause notice (SCN) or statement <sup>1</sup>[or intimation of tax ascertained through FORM GST DRC-01A]

1.	GSTI	N										
2.	Name	e				< Auto>						
3.	Cause	e of p	ayment			<< drop down>>						
						intimation of tax ascertained through FORM GST DR 01A, Mismatch (Form GSTR-1 and Form GSTR-3 Mismatch (Form GSTR-2B and Form GSTR-3B), oth (specify)]					scrutiny, ST DRC- STR-3B),	
4.	Section under which voluntary payment is made				<< drop	dowi	1>>					
5.	Details of show cause notice, if payment is made within 30 days of its issue <sup>1</sup> [, scrutiny, intimation of tax ascertained through Form GST DRC-01A, audit, inspection or investigation, others (specify)]  Financial Year					nce No		Г	ate of issu	ie		
7.		ls of pount in		nade ir	ncluding i	nterest ar	nd pen	alty, if a	pplicab	le		
<sup>3</sup> [Sr. No.	Tax Peri od	Act	Place of supply (POS)	Tax/ Cess	Interest	Penalty, if applicab le	Fee	Others	Total	Ledger utilised (Cash / Credit)	Debit entry no.	Date of debit entry
1	2	3	4	5	6	7	8	9	10	11	12	13
												]

8. Reasons, if any - << Text box>>

#### 9. Verification-

I hereby solemnly affirm and declare that the information given hereinabove is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.

Signature of Authorized Signatory



#### Name

#### Designation / Status

Date -

<sup>&</sup>lt;sup>#</sup> FORM GST DRC-03 has been substituted by Notification No.1090-F.T. dated 28 .06.2019 w. e. f. 28.06.2019.

<sup>1.</sup> Inserted by notification No.1657-F.T. dated 23.12.2021 w.e.f. 01.12.2021.

<sup>2.</sup> Substituted by notification No.1657-F.T. dated 23.12.2021 w.e.f. 01.12.2021 for "Audit, investigation, voluntary, SCN, annual return, reconciliation statement, others (specify)"

<sup>3.</sup> The Table under Sl. No.7 has been substituted by ibid w.e.f. 01.12.2021.



[See rule 142(2)]

Reference No:			Date:
То			
	GSTIN/ID		
	Name		
	Address		
Tax Period		F.Y	
ARN -		Date -	
	Acknowledgem	nent of acceptance of paym	ent made voluntarily
	nt made by you vid and for the reasons		ove is hereby acknowledged to the extent
			Signature
			Name
			Designation
Copy to -			



[See rule 142(3)]

		[See rule 142(5)]	
Reference No:			Date:
То			
	GSTIN/ID		
	Name		
	Address		
Tax Period		F.Y	
SCN -		Date -	
ARN -		Date -	
	Intimation of conclu	sion of proceedings	
and other dues me	ntioned in the notice alo	ng with applicable in	bove. As you have paid the amount of tax terest and penalty in accordance with the otice are hereby concluded.
			Signature
			Name Designation
Copy to - –			



Date -

# **FORM GST DRC - 06**

[See rule 142(4)]

# **Reply to the Show Cause Notice**

Reference	Date of issue
No.	
	No
Yes	
	<u> </u>
leclare that th	ne information given hereinabove is true and correct to the best of
nothing has b	een concealed therefrom.
	Signature of Authorized Signatory
	Name
	Designation / Status
	No. Yes



[See rule 100(1), 100(2), 100(3) & 142(5)]

### Summary of the order

Refe	renc	e No							Da	ate –		
1. De	etails	of ord	er:									
		(a	) Order No.	:								
		(b	) Order date	e:								
		(c)	Financial ye	ear:								
(d)	Tax	period:	From	То								
2. Iss	sues	involve	ed:									
3. Description of goods / services (if applicable):												
		S	r. No.	HSN code		D	escriptio	n				
4. Se	ctio	n(s) of	the Act und	er which dem	and is	s created:						
5. De	etails	of der	nand:									
											(Amo	ount in Rs.)
	Sr.	Tax	Turnover	Tax Period	Act	POS	Tax	Interest	Penalty	Fee	Others	Total

Sr.	Tax Rate	Turnover	Tax Pe	eriod		POS (Place of	Tax	Interest	Penalty	Fee	Others	Total
No.	Rate		From	То		Supply)						
1	2	3	4	5	6	7	8	9	10	11	12	13
Total												

The table has been substituted by Notification No.867-F.T. dated 04.11.2020 w.e.f. 15.10.2020 .



You are hereby directed to make the payment by <date></date>	failing which proceedings	shall be initiated	against you	ı to
recover the outstanding dues.				

Signature
Name
Designation
Jurisdiction
Address
Γο
(GSTIN/ID)
Name
(Address)
Note –
. Only applicable fields may be filled up.
2. Column nos. 2, 3, 4 and 5 of the Table at serial no. 5 i.e. tax rate, turnover and tax period are not mandatory.
3. Place of Supply (POS) details shall be required only if the demand is created under the IGST Act.

<sup>&</sup>lt;sup>®</sup> Subs. by Notification No. 559-F.T. dated 29.03.2019 w.e.f. 01.04.2019.



# **#FORM GST DRC-07A**

[See rule 142A (1)]

# Summary of the order creating demand under existing laws

Reference No. Date -

	Part A – Ba	asic details
Sr. No.	Description	Particulars
(1)	(2)	(3)
1.	GSTIN	
2.	Legal name	< <auto>&gt;</auto>
3.	Trade name, if any	< <auto>&gt;</auto>
4.	Government Authority who passed the order creating the demand	State /UT
		Centre
5.	Old Registration No.	
6.	Jurisdiction under earlier law	
7.	Act under which demand has been created	
8.	Period for which demand has been created	From – mm, yy To mm, yy
9.	Order No. (original)	
10.	Order date (original)	
11.	Latest order no.	
12.	Latest order date	
13.	Date of service of the order (optional)	
14.	Name of the officer who has passed the order (Optional)	
15.	Designation of the officer who has passed the order	
16.	Whether demand is stayed	Yes No

			PITOP	101
17.	Date of stay order			
18	Period of stay	From – to -		

Part B – Demand details							
19.			Details of dem	and created			
	(Amount in Rs. in all Tables)						
Act	Tax	Interest	Penalty	Fee	Others	Total	
1	2	3	4	5	6	7	
Central Acts							
State/ UT Acts							
CST Act							

20.	Amount of demand paid under existing laws					
Act	Tax	Interest	Penalty	Fee	Others	Total
1	2	3	4	5	6	7
Central Acts						
State / UT Acts						
CST Act						

21.	Balance	Balance amount of demand proposed to be recovered under GST						
(19-20)		laws						
(13 20)		<< Auto-populated >>						
Act	Tax	Interest	Penalty	Fee	Others	Total		
1	2	3	4	5	6	7		



Central Acts			
State / UT Acts			
CST Act			

Signature

Name

Designation

Jurisdiction

Го	
	(GSTIN/ID)
	Name
	(Address)
Copy to -	

Note -

- 1. In case of demands relating to short payment of tax declared in return, acknowledgement / reference number of the return may be mentioned.
- 2. Only recoverable demands shall be posted for recovery under GST laws. Once, a demand has been created through **FORM GST DRC-07A**, and the status of the demand changes subsequently, the status may be amended through **FORM GST DRC-08A**.
- 3. Demand paid up to the date of uploading the summary of the order should only be mentioned in Table 20. Different heads of the liabilities under existing laws should be synchronized with the heads defined under Central or State tax.
- 4. Latest order number means the last order passed by the relevant authority for the particular demand.
- 5. Copy of the order vide which demand has been created can be attached. Documents in support of tax payment can also be uploaded, if available.

<sup>\*</sup>Inserted by Notification No. 1570-F.T. dated 02.11.2018 w. e. f. 30.10.2018.



[See rule 142(7)]

Date:

### Summary of Rectification /Withdrawal Order

1. Pa	articulars of o	rder:			
(a) Fi	nancial year,	if applicable			
(b) Ta	ax period, if a	nny	From To		
(c) So passe		which order is			
(d) (	Original order	no.			
(e) (	Original order	date			
(f) R	Rectification of	order no.			
(g) I	Rectification (	order date			
(h) A	RN, if applied	d for rectification	n		
(i) D	Date of ARN				
2. Your app	olication for re	ectification of th	e order referred to above has	been examined	
	•	ce that the abov	e said order requires rectificat	ion (Reason for	
4. The orde	r referred to a	bove (issued un	der section 129) requires to be	e withdrawn	
5. Descripti	on of goods /	services (if app	licable) :		
	Sr. No.	HSN code	Description		



- 6. Section of the Act under which demand is created:
- 7. Details of demand, if any, after rectification:

(Amount in Rs.)

Sr. No.	Tax Rate	Turnover	Tax P	eriod To	Act	POS (Place of Supply)	Tax	Interest	Penalty	Fee	Others	Total
1	2	3	4	5	6	7	8	9	10	11	12	13
Total												

The table has been substituted by Notification No.867-F.T. dated 04.11.2020 w.e.f. 15.10.2020

You are hereby directed to make the payment by <Date> failing which proceedings shall be initiated against you to recover the outstanding dues.

Signature

N	Tame
	Designation
	Jurisdiction
	Address

10	
	(GSTIN/ID)
	Name
	(Address)



#### Note -

- 1. Only applicable fields may be filled up.
- 2. Column nos. 2, 3, 4 and 5 of the Table at serial no. 7 i.e. tax rate, turnover and tax period are not mandatory.
- 3. Place of Supply (POS) details shall be required only if the demand is created under the IGST Act.
- 4. Demand table at serial no. 7 shall not be filled up if an order issued under section 129 is being withdrawn.

<sup>\*</sup>Subs. by Notification No. 559-F.T. dated 29.03.2019 w.e.f. 01.04.2019.



# **@FORM GST DRC-08A**

[See rule 142A (2)]

# Amendment/Modification of summary of the order creating demand under existing laws

Reference no. Date -

Part A – Basic details						
Sr. No.	Description		Particulars			
(1)	(2)		(3)			
1.	GSTIN					
2.	Legal name		< <auto>&gt;</auto>			
3.	Trade name, if any		< <auto>&gt;</auto>			
4.	Reference no. vide which demand uploaded in FORM GST DRC-07A					
5.	Date of FORM GST DRC-07A vide which demand uploaded					
6.	Government Authority who passed the order creating the demand					
		State /UT	Centre			
			< <auto>&gt;&gt;</auto>			
7.	Old Registration No.		<< Auto, editable>>			
8.	Jurisdiction under earlier law		< <auto, editable="">&gt;</auto,>			
9.	Act under which demand has been created		< <auto, editable="">&gt;</auto,>			
10.	Tax period for which demand has been created		< <auto, editable="">&gt;</auto,>			
11.	Order No. (original)		< <auto, editable="">&gt;</auto,>			
12.	Order date (original)		< <auto, editable="">&gt;</auto,>			
13.	Latest order no.		< <auto, editable="">&gt;</auto,>			

		<sup>AAC</sup> TITIC
14.	Latest order date	< <auto, editable="">&gt;</auto,>
15.	Date of service of the order	< <auto, editable="">&gt;</auto,>
16.	Name of the officer who has passed the order (optional)	< <auto, editable="">&gt;</auto,>
17.	Designation of the officer who has passed the order	< <auto, editable="">&gt;</auto,>
18.	Whether demand is stayed	
		Yes No
19.	Date of stay order	
20.	Period of Stay	
21.	Reason for updation	< <text box="">&gt;</text>

Part B – Demand details									
22.	Details of demand posted originally through Table 21 of FORM GST DRC-07A								
	(Amount in Rs. in all tables)								
	< <auto>&gt;</auto>								
Act	Tax	Interest	Penalty	Fee	Others	Total			
1	2	3	4	5	6	7			
Central Acts									
State / UT Acts									
CST Act									

23.	Updation of demand						
Act	Type of updation	Tax	Interest	Penalty	Fee	Others	Total

1	2	3	4	5	6	7	8
1.	Quashing of demand (Complete closure of demand)						
2.	Amount of reduction, if any						
3.	Total reduction (1+2)						

24. (22-23)	Balanc	Balance amount of demand required to be recovered under the Act					
(22 23)			<< Auto-po	pulated	>>		
Act	Tax	Interest	Penalty	Fee	Others	Total	
1	2	3	4	5	6	7	
Central							
Acts							
State /							
UT							
Acts							
CST							
Act							

Signature
Name
Designation
Jurisdiction

To	
	(GSTIN/ID)
	Name
	(Address )
Copy to –	



#### Note -

- 1. Reduction includes payment made under existing laws. If the demand of tax is to be increased then a fresh demand may be created under **FORM GST DRC-07A**.
- 2. Copy of the order vide which demand has been modified /rectified / revised/ updated can be uploaded. Payment document can also be attached.
- 3. Amount recovered under the Act including adjustment made of refund claim will be automatically updated in the liability register. This form shall not be filed for such recoveries.

 $<sup>^{@}</sup>$  Inserted by notification No.1570-F.T. dated 02.11.2018 w. e. f. 30.10.2018.



То	[See rule 143] To							
Pa	articulars of de	efaulter -						
GSTIN – Name - Demand order no.: Reference no. of recovery: Period:			Date: Date:					
		Orde	r for recov	ery through	specified	officer unde	er section 79	
pro		he < <sgst <="" td=""><td>UTGST/ C</td><td>CGST/ IGST/</td><td>CESS&gt;&gt;A</td><td>Act by the af</td><td>and penalty is pay foresaid person whe below:</td><td></td></sgst>	UTGST/ C	CGST/ IGST/	CESS>>A	Act by the af	and penalty is pay foresaid person whe below:	
							(Amount in Rs.)	
	Act	Tax/Cess	Interest	Penalty	Fee	Others	Total	
ŀ	1	2	3	4	5	6	7	
	Integrated tax							
İ	Central tax							
	State/UT tax							
	Cess							
	Total							
The	The table has been substituted by Notification No.867-F.T. dated 04.11.2020 w.e.f. 15.10.2020							
	<< Remarks>>							



You are, hereby, required under the provisions of section 79 of the West Bengal Goods and Services Tax Actto recover the amount due from the << person >>as mentioned above.

Signature	
Name	
Designation	r

Place: Date:



goods specified in

liable for sale or

#### **#FORM GST DRC - 10**

[See rule 144(2)&144A]

### Notice for Auction under section 79 (1) (b) or section 129(6) of the Act

the Schedule below for recovery of Rs...... and interest thereon and admissible expenditure incurred on

disposal in accordance with the provisions of sub-section (6) of Section 129 for recovery of penalty of Rs..... payable under sub-section (3) of section 129 and the expenses incurred in safe custody and

Whereas an order has been made by me for sale of the attached or distrained

Whereas the goods or conveyance detained or seized under Section 129 are

such goods or conveyance and other administrative expenses.

the recovery process in accordance with the provisions of section 79.

Date:

Demand order no.:

Period:

Or

handling of

lots specific liabilities ar	ed in the Schedule. The	sale will be of the right, title an said properties, so far as they have	d interests of the default	er. And the
The	•	at AM/PM.  e paid at the time of sale or as per ayment, the goods and/or conveyar	•	-
and resold.				
		Schedule		
	Serial No.	Description of goods or conveyance	Quantity	
	1	2	3	
	Place:	Signature		
	Date:	Name		
		Designation	1:	

# Substituted by notification No. 69-F.T. dated 18.01.2022 w.e.f. 01.01.2022.



<sup>1</sup>[See rule 144(5), 144A and 147(12)]

### Notice to successful bidder

10,		
Please refer to Public Auction Reference no, you have been found to be a		
You are hereby, required to make payment of Rs of auction.	within	a period of 15 days from the date
The possession of the <sup>2</sup> [goods or conveyance] shall be payment of the bid amount.	e transferred to you	after you have made the full
	Signature Name Designation	
Place:	C	
Date:		

- 1. Substituted by notification No. 69-F.T. dated 18.01.2022 w.e.f. 01.01.2022 for "See rule 144(5) & 147(12)".
- 2. Substituted by notification No. 69-F.T. dated 18.01.2022 w.e.f. 01.01.2022 for "goods".



<sup>1</sup>[See rule 144(5), 144A and 147(12)]

### **Sale Certificate**

Demand order no.:	Date:
Reference no. of recovery:	Date:
Period:	

This is to certify that the following <sup>2</sup>[goods or conveyance]:

### **Schedule (Movable Goods)**

Sr. No.	Description of <sup>2</sup> [goods or conveyance]	Quantity
1	2	3

# **Schedule (Immovable Goods)**

Building	Floor	Name of	Roa	Locali	Distri	Stat	PIN	Latitude	Longitud
No./	No.	the	d/	ty/	ct	e	Code	(optional	e
Flat No.		Premises	Stre	Villag				)	(optional
		/Building	et	e					)
1	2	3	4	5	6	7	8	9	10

### **Schedule (Shares)**

Sr. No.	Name of the Company	Quantity	Value
1	2	3	4

have been sold to	at	in public auction of the
goods held for recovery of ru	ipees in accordance with the	he provisions of section $79(1)(b)/(d)^{3}$ [or
section 129(6)] of the < <sgst< td=""><td>T/UTGST/ CGST/ IGST/ CESS&gt;&gt; A</td><td>Act/Act and rules made thereunder on</td></sgst<>	T/UTGST/ CGST/ IGST/ CESS>> A	Act/Act and rules made thereunder on
and the said	(Purchaser) has been	declared to be the purchaser of the said
goods at the time of sale. The	e sale price of the said goods was	received on The sale was
confirmed on		



Signature Name Designation

Place:			
Date:			

1. Substituted by notification No. 69-F.T. dated 18.01.2022 w.e.f. 01.01.2022 for "See rule 144(5) & 147(12)".

- 2. Substituted by ibid w.e.f. 01.01.2022 for "goods".
- 3. Inserted by ibid w.e.f. 01.01.2022.



[See rule 145(1)]

# Notice to a third person under section 79(1) (c)

To The	
Particulars of defaulter -	
GSTIN – Name - Demand order no.: Reference no. of recovery: Period: Whereas a sum of Ps.	Date: Date: ccount of tax, cess, interest and penalty is payable under the provisions
	ST>> Act/Act by < <name of="" person="" taxable="">&gt; holding &lt;<gstin>&gt;</gstin></name>
It is observed that a sum of rupees	is due or may become due to the said taxable person from you; or
It is observed that you hold or are like	ely to hold a sum of rupees for or on account of the said person.
	m of rupees to the Government forthwith or upon the money liance of the provisions contained in clause (c)(i) of sub-section (1) of
the Act to have been made under t	by you in compliance of this notice will be deemed under section 79 of the authority of the said taxable person and the certificate from the 14 will constitute a good and sufficient discharge of your liability to nt specified in the certificate.
will be personally liable to the State	e any liability to the said taxable person after receipt of this notice, you /Central Government under section 79 of the Act to the extent of the of the liability of the taxable person for tax, cess, interest and penalty.
•	nake payment in pursuance of this notice, you shall be deemed to be a pecified in the notice and consequences of the Act or the rules made
DI.	Signature Name Designation
Place: Date:	



[See rule 145(2)]

# Certificate of Payment to a Third Person

In response to the notice issued to	you in <b>FORM G</b>	ST DRC-13 bearing reference no					
ated, you have discharged your liability by making a payment of Rs f							
the defaulter named below:							
GSTIN –							
Name -	_						
Demand order no.:	Date:						
Reference no. of recovery:	Date:						
Period:							
This certificate will constitute a good to the extent of the amount specifie		scharge of your liability to above mentio	oned defaulter				
		Signature					
		Name					
		Designation					
Place:							
Date:							



[See rule 146]

# APPLICATION BEFORE THE CIVIL COURT REQUESTING EXECUTION FOR A DECREE

То			
The Magistrate /Judge of t	the Court of		
Demand order no.:	Date:	Period	
Sir/Ma'am,			
•	1	l in your Court on the day of	•
the said person. However	, the said person is liable	to pay a sum of rupees under the provisions of Act vide order number dated	
You are requested to excreçoverable amount as me		edit the net proceeds for settlement of the outsta	anding
Place:			
Date:			
		Proper Officer/ Specified Officer	



[See rule 147(1) & 151(1)]

То	
GSTIN -	
Name -	
Address -	
Demand order no.: Reference no. of recovery: Period:	Date:

#### Notice for attachment and sale of immovable/movable goods/shares under section 79

Whereas you have failed to pay the amount of Rs....., being the arrears of tax/cess/interest/penalty/ fee payable by you under the provisions of the <<SGST/UTGST/ CGST/ IGST/ CESS>> Act/Act.

The immovable goods mentioned in the Table below are, therefore, attached and will be sold for the recovery of the said amount. You are hereby prohibited from transferring or creating a charge on the said goods in any way and any transfer or charge created by you shall be invalid.

#### **Schedule (Movable)**

Sr. No.	Description of goods	Quantity
1	2	3

#### **Schedule (Immovable)**

Building	Floor	Name of	Road	Locali	Distric	Stat	PIN	Latitud	Longitud
No./	No.	the	/	ty/	t	e	Code	e	e
Flat No.		Premises	Stree	Villag				(option	(optional
		/Building	t	e				al)	)
1	2	3	4	5	6	7	8	9	10



# Schedule (Shares)

Sr. No.	Name of the Company	Quantity
1	2	3

Signature Name Designation

Pl	ace:
D	ate.



[See rule 147(4)]

### Notice for Auction of Immovable/Movable Property under section 79(1) (d)

Date:

Demand order no.:

against each lot.

Reference number of recovery: Period:	Date:
•	or sale of the attached or distrained goods specified in the terest thereon and admissible expenditure incurred on the s of section 79.
Schedule. The sale will be of the right, title and	goods shall be put up for sale in the lots specified in the interests of the defaulter. And the liabilities and claims we been ascertained, are those specified in the Schedule

The price of each lot shall be paid at the time of sale or as per the directions of the proper officer/ specified officer and in default of payment, the goods shall be again put up for auction and resold.

#### **Schedule (Movable)**

Sr. No.	Description of goods	Quantity
1	1 2	

#### **Schedule (Immovable)**

Building	Floor	Name of	Road	Locali	Distric	Stat	PIN	Latitud	Longitud
No./	No.	the	/	ty/	t	e	Code	e	e
Flat No.		Premises	Stree	Villag				(option	(optional
		/Building	t	e				al)	)
1	2	3	4	5	6	7	8	9	10



# **Schedule (Shares)**

Sr. No.	Name of the Company	Quantity
1	2	3

Signature Name Designation

Place: Date:



[See rule 155]

То	
Name & Address of District Collector	
Demand order no.:	Date:
Reference number of recovery: Period:	Date:
Certificate action under	clause (e) of sub-section (1) section 79
and is payable by M/s holding	that a sum of Rs has been demanded from ag GSTINunder< <sgst cess="" cgst="" igst="" utgst="">&gt; ecovered from the said defaulter in the manner provided under</sgst>
< <demand details="">&gt;</demand>	
The said GSTIN holder owns property/reside which are given hereunder: -	es/carries on business in your jurisdiction the particulars of
< <description>&gt;</description>	
You are requested to take early steps to realiswere an arrear of land revenue.	se the sum of rupees from the said defaulter as if it
	Signature Name
	Designation
Place: Date:	
Date.	



[See rule 156]

To,				
Magistrate,				
< <name address<="" and="" td=""><td>s of the Court&gt;&gt;</td><td></td><td></td><td></td></name>	s of the Court>>			
Demand order no.: Reference number of Period:	·	Date: Date: Iagistrate for Recovery a	as Fine	
of tax, interest and pe	enalty payable under the	n < <name of="" pers<br="" taxable="">e provisions of the Act. Y of clause (f) of sub-section</name>	ou are requestedto kindly	recover such
		<b>Details of Amount</b>		
Description	Central tax	State /UT tax	Integrated tax	CESS
Tax/Cess				
Interest				
Penalty				
Fees				
Others				
Total				
Place: Date:		Signature Name Designati	on	



[See rule 158(1)]

# **Application for Deferred Payment/ Payment in Installments**

1. Name of the tax:	able person-			
2. GSTIN -				
3. Period				
	nt of tax/ other dues or	on 80 of the Act, I requesto allow me to pay suc	-	-
Demand ID				
Description	Central tax	State /UT tax	Integrated tax	CESS
Tax/Cess				
Interest				
Penalty				
Fees				
Others				
Total				
Reasons: -			Upload	Document
		Verification		
•		the information given he been concealed therefro		correct to the best of
Signature of Author	rized Signatory			
Name				
Place -				
Date -				



[See rule 158(2)]

Reference No <<>>	o <<>>				
To					
GSTIN					
Name					
Address					
Demand Order No.	Date:				
Reference number of recovery:	Date:				
Period -	<del></del>				
Application Reference No. (ARN) -	Date -				
Order for acceptance/rejection of appli	ication for deferred payment / payment in instalments				
deferred payment / payment of tax/other dues are allowed to pay tax and other dues by and other dues amounting to rupees in  This has reference to your above referred appli	OR ication, filed under section 80 of the Act. Your application for in instalments has been examined and it has not been found				
Reasons for rejection					
	Signature				
	Name				
	Designation				
Place:					
Date:					



[See rule 159(1)]

Refere	ence No.: Date:
То	
	Name
	Address
	Post Office/Financial Institution/Immovable property registering authority/ Regional Transport rity/Other Relevant Authority)
	Provisional attachment of property under section 83
	It is to inform that M/s (name) having principal place of business at
	(address) bearing registration number as (GSTIN/ID), PAN is a registered taxable person under the < <wbgst cgst="">&gt; Act.</wbgst>
	or
	It is to inform that Sh
	Proceedings have been launched against the aforesaid person under section << >> of the said Act to determine the tax or any other amount due from the said person. As per information available with the department, it has come to my notice that the said person has a -
	< <saving current="" depository="" fd="" rd="">&gt;account in your &lt;&lt; bank/post office/financial institution&gt;&gt; having account no. &lt;&lt; A/c no. &gt;&gt;;</saving>
	or
	property located at << property ID & location>>.
	or
	Vehicle No< < <description>&gt;</description>
	or
	Others (please specify)



In order to protect the interests of conferred under section 83 of the Act, I hereby provisionally attach		powers (designation),
•	1 1	
No debit shall be allowed to be the aforesaid person on the same PAN	made from the said account or any without the prior permission	other account operated by a of this department.
or		
The property mentioned above s permission of this department.	shall not be allowed to be disposed	of without the prior
	Signature	
	Name	
	Designation	

 $*Substituted\ by\ notification\ No.\ 69-F.T.\ dated\ 18.01.2022\ w.e.f.\ 01.01.2022.$ 

Copy to (person)



# \*FORM GST DRC - 22A

[See rule 159(5)]

Reference No.:	Date:	
ARN No. of Order in FORM GST DRC-22	) <del>:</del>	
т.		
To		
The Pr. Commissioner/Commissioner	r	
(Jurisdiction)		
Application for filing object	tion against provisional attachment of prop	perty
	22 has been issued for provisional attachment of the Act vide ARN No	_
Ref ID		
Property provisionally attached	<< property id & location>>	
Account provisionally attached	<< saving/current/FD/RD/depository account no>>	
Vehicle provisionally attached	< <vehicle details="">&gt;</vehicle>	
Any other property	< <details>&gt;</details>	
2. In accordance with the provisions of F objection on the basis of following facts and .  <	Rule 159(5) of the WBGST Rules , 2017, I d circumstances.	hereby submit my



I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.

Name-GSTIN (in case of registered person)-PAN and/or Aadhaar No. (in case of others)-Place -Date -

Signature of Authorized Signatory

1. Inserted by notification No. 69-F.T. dated 18.01.2022 w.e.f. 01.01.2022.



[See rule 159(3), 159(5) & 159(6)]

Reference No.:	Date:
То	
Name Address	
(Bank/ Post Office/Financial Institu Authority/Other Relevant Authority	ution/Immovable property registering authority <sup>1</sup> [/ Regional Transport y])
Order reference No	Date –
Please refer to the attachment office/financial institution>> have safeguard the interest of revenue	of << saving / current / FD/RD>> account in your<< bank/post ing account no. <<>>, attached vide above referred order, to in the proceedings launched against the person. Now, there is no such e said accounts. Therefore, the said account may now be restored to the
or	
the interest of revenue in the proce	roperty << ID /Locality>> attached vide above referred order to safeguard redings launched against the person. Now, there is no such <sup>2</sup> [requirement property. Therefore, the said property may be restored to the person
	Signature Name Designation
Copy to -	

<sup>1.</sup> Inserted by notification No. 69-F.T. dated 18.01.2022 w.e.f. 01.01.2022.

<sup>2.</sup> Substituted by notification No. 69-F.T. dated 18.01.2022 w.e.f. 01.01.2022 for "proceedings pending against the defaulting person which warrants the".



[See rule 160]

То								
The	e Liquidator/Rece	iver,						
Na	me of the taxable	person:						
GS	STIN:							
De	mand order no.:	Date	e:			Perio	od:	
			Intimation	ı to Liquida	tor for reco	very of amount	t	
liqu	is has reference t uidator for the << npany owes / likel	company	name>> h	olding < <g< td=""><td>STIN&gt;&gt;.In t</td><td>his connection,</td><td>it is informed the</td><td></td></g<>	STIN>>.In t	his connection,	it is informed the	
			Cu	rrent / Anti	icipated Der	nand		
						(A	mount in Rs.)	
	Act	Tax	Interest	Penalty	Fee	Other Dues	Total Arrears	
	1	2	3	4	5	6	7	
	Central tax							
	State / UT tax							
-	Integrated tax							
	Cess							
The	table has been substi	tuted by No	otification No	.867-F.T. date	d 04.11.2020 w	v.e.f. 15.10.2020	<u> </u>	J
	compliance of the ovision for dischar	-			-	-		
						Name		
						Designation		
Pla Da								



[See rule 161]

Reference No <<	>>>						<< Date >>
To GSTIN Name Address							
Demand Order No.: Reference number of recovery: Period: Reference No. in Appeal or Revision or any			ny other pro	oceeding -	Date: Date:	Date:	:
		Contin	uation of R	ecovery P	roceedings		
reference number fo The Appellate /Re enhanced/reduced No	r a sum o evisional the ede recovery emand aft	f Rs authority / dues covide ry of enhar proceeding ter giving ef	Court  vered by order no nced/reduced gs stood implication of appear	the d l amount mediately al / revisio	above ated of Rs before disp n is given b	mentioned au mentioned and the cosal of appelow:	ove referred recovery athority / Court>>has d demand order e dues now stands at ds continued from the ppeal or revision. The
Act	Tax	Interest	Penalty	Fee	Other Dues	Total Arrears	
1	2	3	4	5	6	7	
Central tax							
State / UT tax							
Integrated tax							
Cess							
The table has been subst	tituted by N	otification No	.867-F.T. dated	d 04.11.2020	) w.e.f. 15.10.2	2020	I
Place:						Nai	gnature me signation
Date:							



### **FORM GST CPD-01**

[See rule 162(1)]

### **Application for Compounding of Offence**

1.	GSTIN / Temporary ID	
2.	Name of the applicant	
3.	Address	
4.	The violation of provisions of the Act for which prosecution is instituted or contemplated	
5.	Details of adjudication order/notice	
	Reference Number	
	Date	
	Tax	
	Interest	
	Penalty	
	Fine, if any	
6.	Brief facts of the case and particulars of the offence (s) charged:	
7.	Whether this is the first offence under the Act	
8.	If answer to 7 is in the negative, the details of previous cases	
9.	Whether any proceedings for the same or any other offence are contemplated under any other law.	
10.	If answer to 9 is in the affirmative, the details thereof	

#### **DECLARATION**

- (1) I shall pay the compounding amount, as may be fixed by the Commissioner.
- (2) I understand that I cannot claim, as a matter of right, that the offence committed by me under the Act shall be compounded.

Signature of the applicant

Name



# FORM GST CPD-02

[See rule 162(3)]

Reference N	No:		Date:
То			
GSTIN/ID Name Address			
Address	ARN	Date –	
	•		ding of offence application has been examined in the
	< <text>&gt;</text>		
offences sta	ated in column (2) of the	e table below on payment of	compound the offences in respect of the compounding amount indicated in column (3):
*[Sr. No.	Offence	Act	Compounding amount
			(Rs.)
(1)	(2)	(3)	(4)
specified in maximum o be categoriz	Column (2), the composit the amounts specified zed.	ounding amount shall be the against the categories in v	able person falls in more than one category ne amount specified in column (3), which is the which the offence sought to be compounded can
You are her	reby directed to pay the ng amount, you will be		nount by (date) and on payment of the osecution for the offences listed in column (2)
or			
applic	cation is hereby rejected	I.	Signature



\*\*\*\*

<sup>\*</sup>Subs. by Notification No. 559-F.T. dated 29.03.2019 w.e.f. 01.04.2019.

<sup>\*</sup>FORM GST INS-01 to 05, FORM GST DRC-01 to 25 and FORM GST CPD-01 to 02 have been inserted by Notification No. 1221-F.T. dated 06.07.2017.