

FORM VAT- M1
(See rule 63)

Form of memorandum of appeal to the appellate authorities other than the Tribunal, under section 33 of the Haryana Value Added Tax Act,2003.

(Space for court fee stamp) Value of court fee stamps affixed.....

Before Jt. Excise and Taxation Commissioner (Appeals)/ Excise and Taxation Commissioner, Haryana

No..... of20.....

(To be filled in by the office of the Joint Excise &Taxation Commissioner(Appeals)/Excise and Taxation Commissioner, Haryana.)

M/s..... Appellant

Versus

Assessing Authority/Taxing Authority.....(District) Respondent

Theday of.....20.....

- 1. Assessment year.....
- 2. Authority passing the order appealed against.....
- 3. Date of the order appealed against.....
- 4. Date of communication of the order appealed against.....
- 5. Address to which notice may be sent to the appellant.....
- 6. Relief claimed in appeal:-
 - a. Turnover determined by the Assessing Authority.....
 - b. If turnover is disputed
 - (i) disputed turnover.....
 - (ii) tax due on the disputed turnover.....
 - c. if rate of tax is disputed
 - (i) turnover involved.....
 - (ii) amount of tax disputed.....
 - d. Any other relief claimed.....
- 7. The appellant has paid the tax assessed, interest levied and penalty imposed under the order appealed against as shown below:-

Table with 6 columns: Description, Amount Paid before assessment, Amount, Treasury Receipt No., Date, Balance due, if any, at the time of filing of appeal Amount. Rows include (i) Out of admitted tax & interest and (ii) Out of disputed tax, interest & penalty.

- 8. Grounds of appeal (may be recorded in a separate sheet if the space is insufficient).

Signatures of appellant or his Authorized agent

Verification

I/We..... appellant(s) named in the above memorandum of appeal do hereby declare that what is stated herein is true and correct to the best of my/our knowledge and belief.

Verified today the day of.....20.....

Signatures of appellant or his
Authorized agent

.....

For use in the office of the authority concerned

(office seal)

Receipt No.
Date of receipt

Signature of receiving
officer/official.....
Name :

.....

Acknowledgment

Received from M/s.....of
district R.C. No.(if any).....appeal alongwith the enclosures
mentioned therein.

Place: Signature of receiving
Date: officer/official with seal

(office seal)

FORM VAT - M2
(See rule 63)

Form of memorandum of appeal to the Tribunal under section 33 of the Haryana Value Added Tax Act,2003.

(Space for court fee stamp) Value of court fee stamps affixed.....

Before the Tribunal, Haryana

No..... of20.....

(To be filled in by the office of the Tribunal)

M/s..... Appellant

Versus

Jt. Excise & Taxation Commissioner (Appeals)/Excise and Taxation Commissioner, Haryana
.....Respondent

Theday of.....200

1. Name of the authority passing the original order.....
2. Assessment year.....
3. Authority(designation) passing the order appealed against.....
4. Date of communication of the order appealed against.....
5. Address to which notice may be sent to the appellant.....
6. Relief claimed in appeal:-
 - (a) Turnover determined by the original order.....
 - (b) Turnover determined by the order appealed against...
 - (c) If turnover is disputed.....
 - (i)disputed turnover.....
 - (ii) tax due on the disputed turnover.....
 - (d) if rate of tax is disputed.....
 - (i) turnover involved.....
 - (ii) amount of tax disputed.....
 - (e) If penalty is disputed:-
 - (i) penalty imposed by the original order
 - (ii) penalty determined by the order appealed against
 - (f) Any other relief claimed.....

7. The appellant has paid the tax assessed, interest levied and penalty imposed under the order appealed against as shown below:-

	Amount Paid before assessment	Paid after assessment			Balance due, if any, at the time of filing of appeal Amount
		Amount	Treasury Receipt No.	Date	
(i) Out of admitted tax & interest.					
(ii) Out of disputed tax, interest & penalty					

8. Grounds of appeal (may be recorded in a separate sheet if the space is insufficient).
.....

Signatures of appellant or his

Authorized agent

Verification

I/We..... appellant(s) named in the above memorandum of appeal do hereby declare that what is stated herein is true and correct to the best of my/our knowledge and belief.

Verified today the day of.....20....

Signatures of appellant or his
Authorized agent

.....

For use in the office of the authority concerned

(office seal)

Receipt No.
Date of receipt

Signature of receiving officer/official.....
Name :

.....

Acknowledgement

Received from M/s.....of district
R.C. No.(if any).....appeal alongwith the enclosures mentioned therein.

Place:
Date:

Signature of receiving
officer/official with seal.....

(Office seal)

(See rule 67)

Space for court fee stamps Value of court fee stamps affixed.....

No..... of20.....

(To be filled in by the office of Tribunal)

M/s..... Applicant

The date of 20....

1. Number and date of the order sought to be reviewed.....
2. Date of communication of the order sought to be reviewed
3. Questions of fact(s) decided, vide the impugned order.....
4. Question(s) of law decided by the impugned order.....
5. Fresh fact(s) which were not before the authority when it passed the order
(state facts briefly with a narrative)
.....
6. Question(s) of the fact(s) now raised.....
7. Treasury/Bank receipt No.....date..... showing the payment
of fee of Rs..... is enclosed.

Signature of applicant or his
Authorized agent.

For use in the office of the authority concerned.

(office seal)

Receipt No.....

Date of receipt.....

Signature of receiving Officer/Official.....

Received from M/s.....of
districtRC No.(if any).....application alongwith the
enclosures mentioned therein.

Place.....

Date.....

(Office Seal)

Signature of receiving
Officer/Official with seal.....

Form VAT – M4
(See Rule 68)
**FORM OF APPLICATION FOR OBTAINING CLARIFICATION UNDER SECTION 56 (3) OF THE HARYANA
VALUE ADDED TAX ACT 2003**

Space for Court fee stamps

Value of Court fee stamps
affixed

BEFORE THE STATE GOVERNEMENT

*Application No. of date...../20.....
(To be filled in by the office of the concerned authority)*

1.

Full Name of the Applicant

.....
2.

Address of the applicant

.....
3.

TIN (in case of a dealer)

.....
4.

Address to which communication
may be made with the applicant
(including Telephone No., if any)

.....
.....
5.

Status (whether a dealer or a
body of dealers)

.....
6.

Question(s) relating to the levy, assessment and collection of tax on which the
clarification is sought

.....(attach
separate sheet if space is insufficient).
7.

Statement of the relevant facts having a bearing on the aforesaid question(s)
.....

.....(attach
separate sheet if space is insufficient).
8.

Statement containing the applicant's interpretation of law or facts, as the case may be,
in respect of the aforesaid question(s).....

.....(attach
separate sheet if space is insufficient).
9.

List of statements/ annexure/
documents attached.

.....

(Signature of the applicant)

Name.....

Status.....

(in relation to the applicant)

VERIFICATION

I,son/ daughter of Sh..... (status)
..... Prop./Partner/Director/authorised representative of do hereby
solemnly affirm and declare that the above statement(s), annexure(s) and document(s) attached
herewith, is/ are correct and complete to the best of my knowledge and belief, and that the question(s)
raised above has/ have not been settled by an order of Tribunal or the law declared by the High court
or the Supreme Court, and that I make this application in my capacity as and
that I am competent to make this application and to verify it.

Place :
Date :
.....

Signature of the applicant

For use in the office of the authority concerned

(office seal)

Receipt No.

Date of receipt

Signature of receiving officer/official.....

Name :

.....

Acknowledgement

Received from M/s.....of district
R.C. No.(if any).....appeal alongwith the enclosures mentioned therein.

Place:

Date:

Signature of receiving
officer/official with seal.....

(Office seal)