Department of value Added Tax

Form DVAT 34

(See Rule 43 of the Daman and Diu Value Added Tax Rules, 2005)

Export Declaration

Book No. _____

Form Serial No. _____

COUNTER-FOIL

(To be retained by the consignor for record)

To be used by a dealer registered under the Daman and Diu Value Added Tax Regulation, 2005 for consigning goods from Daman and Diu (To be filled in by the consignor)

Particulars of Consignee

 and of contractions													
1. Full Name of Consignee (For individuals, provide in order of first name, middle name, surname)													
2. Address of Consignee		ildin mbe	g Na er	me/									
	Are	ea/ F	Road										
	Cit	у											
	Dis	strict											
	Sta	ate											
	Pir	n Co	de										
	Te	leph	one l	Num	ber								
3. Registration No. of Consignee*													

* CST Registration No.

Particulars of Goods

SI.No	Name of Goods	Quantity (no. of packets)	Weight (in quintals)	Value (Rs.)

Nature of transaction	Tick 🗹 one	Sale	Other (pls specify)
			······································

Cash Memo / Invoice / Deliver Note No.							
Date (dd/mm/yyyy)		/		/	2	0	

Particulars of Consignor

	1. Full Name of Consignor (For individuals, provide in order of first name, middle name, surname)														
	2. Address of Consignor		ilding mbe		me/										
		Are	ea/ R	load											
		Lo	cality	/ Ma	irket										
		Pir	n Coo	de											
	3. Registration No. of Consignor														
		- -	-	Τ.				_							
Date c	of declaration (dd/mm/yyyy)	2	2 C)											

Department of value Added Tax

Form DVAT 34

(See Rule 43 of the Daman and Diu Value Added Tax Rules, 2005)

Export Declaration

Book No. _____

Form Serial No. ___

ORIGINAL

(To be submitted by the person carrying goods with the check post authorities at the time of Exit out of Daman and Diu)

To be used by a dealer registered under the Daman and Diu Value Added Tax Regulation, 2005 for consigning goods from

Daman and Diu (To be filled in by the consignor)

Particulars of Consignee

1. Full Name of Consignee (For individuals, provide in order of first													
(For Individuals, provide in order of first name, middle name, surname)													
2. Address of Consignee		ildinų mbe		me/									
	Are	ea/ F	load										
	Cit	у											
	Dis	strict											
	Sta	ate											
	Pir	n Co	de										
	Те	leph	one l	Num	ber								
3. Registration No. of Consignee*													

* CST Registration No.

Particulars of Goods

SI.No	Name of Goods			(n		antit pac	y kets)				Veig quin	ht tals)			Valu	ıe (R	s.)	
Nature	of transaction Tick 🗹 d	one			Sale	9				Ot	ner (pls s	pecif	fy)	 			
Cash I No.	Memo / Invoice / Deliver Note																	
Date (c	ld/mm/yyyy)		/			/	2	()									
Partice	ulars of Consignor																	
	1. Full Name of Consignor (For individuals, provide in order of first name, middle name, surname)	t															_	
	2. Address of Consignor		uildin umbe	g Nai er	ne/													
		Ar	rea/ F	Road														
		Lo	ocalit	y/ Ma	rket													
		Pi	n Co	de														
	3. Registration No.																	

2

0

Time

Date of declaration (dd/mm

To be filled in by the transporter

Registration No. of Goods Carrier: ____
 Date and Time of dispatch: Date ____

Consignor's Stamp

3. Name of transporter:

4. Address of transporter:

5. Signature and Stamp of transporter:

Transporter's Stamp

Form DVAT 34

(See Rule 43 of the Daman and Diu Value Added Tax Rules, 2005)

Export Declaration

Book No. _____

Form Serial No. _____

DUPLICATE

(To be subsequently submitted with the Value Added Tax authorities at the time of issuance of fresh forms along with the utilisation details of the forms got issued earlier)

To be used by a dealer registered under the Daman and Diu Value Added Tax Regulation, 2005 for consigning goods from Daman and Diu (To be filled in by the consignor)

Particulars of Consignee

1. Full Name of Consignee (For individuals, provide in order of first												
name, middle name, surname)												
2. Address of Consignee	Buildin Numbe		me/									
	Area/ I	Road										
	City											
	Distric	1										
	State											
	Pin Co	de										
	Teleph	one l	Num	ber								
3. Registration No. of Consignee*												

* CST Registration No.

Particulars of Goods

SI.No	Name of Goods	Quantity (no. of packets)	Weight (in quintals)	Value (Rs.)

Nature of transaction	Tick 🗹 one	Sale	Other (pls specify)

Cash Memo / Invoice / Deliver Note No.							
Date (dd/mm/yyyy)		/		/	2	0	

Particulars of Consignor

1. Full Name of Consignor (For individuals, provide in order of first																		
name, middle name, surname)																		
2. Address of Consignor		ilding mbe	g Nai r	me/														
	Are	Area/ Road																
	Lo	Locality/ Market																
	Pir	n Coo	de															
3. Registration No. of Consignor																		
											1							
Date of declaration (dd/mm/yyyy)		/			/	2	2 0)										
														(Cons	igno	r's	

Stamp

To be filled in by the transporter

- Registration No. of Goods Carrier: ______
 Date and Time of dispatch: Date ______
 Name of transporter: ______
 Address of transporter: ______
 S. Signature and Stamp of transporter: ______

Time__

Transporter's Stamp