FORM 501

[See sub- rule (3) of rule 54]

Full address of the appellant:			
Signature Dated thedayof 200 (To be signed by the appellant or by agent duly authorized in writing in this behalf by the appellant).			
10.	The applicantstated herein is true.	named above, does hereby declare that what is	
9.	(if necessary attach a separate shifthe appellant thereof prays:		
8.	Enter here the ground relied on for		
7.	The applicant has not preferred ar authority, at any time.	ny appeal against the aforesaid Order, before any	
	rejected/ dismissed / partly allowe	d.	
6.	appealed against as detailed below	w: st the order passed byhas been	
5.	(if necessary attach a separate sheet of paper) The applicant has paid the tax assessed and/or penalty imposed Under the order		
4.	Statement of facts of the cases:	eet of naner)	
3.	. The amount of tax and/or penalty in dispute.		
1. 2.	, ,		
	and designation of the officer who	passed the stating and a state of the state	
Date of receipt of the order			
Date of order against which the appeal is made			
The			
To,			
•	e here the amount of fee stamps affixed)		
(Spac	ce for court-fee stamps)	Appeal or Second appeal under section 73 of the Gujarat Value Added Tax,2003	