FORM 702

(See rule 7)

Complain against any authority for vexatious order or wilful underassessment under subsection (1) of section 12 of Maharashtra Value Added Tax Act, 2002

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Action against ______ for vexatious order or wilful underassessment Subject: Sir,

I/We, the undersigned, do hereby state that the above mentioned authority has passed a false/vexatious order in my/our case or the said authority has not acted upon the application made by me/us. The details are as under.

Name of the dealer		
Registration Certificate Number under M.V.A.T.Act, 2002		
Address of the dealer		
Name and designation of the officer		
who has passed the order/before		
whom the application is filed**		
Period of the order	From	То
Nature of the order/subject matter of the application **		
Order passed u/s		
Date of the order/Date of the application **		
*Brief nature of complaint		

You are requested to look into matter and take appropriate action as required under section 12

Enclosure: Copy of the order

Yours faithfully

RUSHABH INFOSOFT LTD.

Date	Signature
	Name of the complainant
Place	Status

* Annex a separate page, if necessary ** Strike out whichever is not applicable

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