

Form DVAT 38

(See Rule 52 of the Daman and Diu Value Added Tax Rules, 2005)

Appeal Form under Daman and Diu Value Added Tax Regulation, 2005

To _____
 The _____

1. Registration Number
2. Full Name of the Dealer
3. Address
4. Contact Telephone Number(s)

5. Nature of objection Please attach copy of Assessment, order or decision appealed against	
6. Tax period to which the appeal pertains	___ ___ / ___ ___ / ___ ___ ___ ___ to DD / MM / YYYY
7. Date of issue of Assessment, order or decision appealed against	___ ___ / ___ ___ / ___ ___ ___ ___ DD / MM / YYYY
8. Date of service of Assessment, order or decision appealed against	___ ___ / ___ ___ / ___ ___ ___ ___ <u>DD / MM / YYYY</u>
9. Is the appeal filed within time prescribed (Please tick)	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. If the appeal is not filed within time, attach Form DVAT 39.	

11. Is the appeal against an assessment?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12. If yes, then specify the amount of assessment		
13. Specify the amount of said assessment that is not disputed (Please attach proof of payment of said amount)		
14. Specify the amount of said assessment that is appealed against		

		Taxable turnover (Rs.)	Tax (Rs.) (i)	Interest (Rs.) (ii)	Penalty (Rs.) (iii)	Total (Rs.) (i + ii + iii)
As assessed	A					
As admitted by appellant	B					
Amount in dispute	A-B					

15. Do you want a hearing?

Yes

No

16. Please state fully and in detail the grounds on which you are objecting. This must be done even if you have requested for a hearing.

Attach additional sheet(s) in case you are not able to provide all details in this space

Attach all documents/ evidence that you want to be considered regarding your appeal

17. Please annex the list of enclosures

18. Verification

I/We _____ hereby solemnly affirm and declare that the information given in this form and its attachments (if any) is true and correct to the best of my/our knowledge and belief and nothing has been concealed therefrom.

Authorised Signatory

Name

Designation

Place

Date