

FORM XVIII

Tripsheet

(See sub-rule (3) and sub-rule (7) of rule 26)

(To be submitted in triplicate)

Name and address of the Transport Company-----

Vehicle Number-----

Name and address of the owner of the vehicle-----

Name and address of the driver of the vehicle-----

S.I. No.	G.R. No.	Consigner	Consignee	Station from	Station to	Description of goods	Weight/ quantity/ number of goods	Value of goods
1	2	3	4	5	6	7	8	9

If the goods are dispatched to a place in Uttaranchal, number of Form of Declaration for Import	In case the goods are to be transported through the State	
	Name of the exit Check post	Date upto which the vehicle is to cross the exit check post
10	11(a)	11(b)

I, hereby declare that the information given above is true to the best of my knowledge and belief.

Place-----

Signature-----

Date-----

Full name-----

Status-----

To be filled by Officer –in-charge of Entry Check Post	To be filled by Officer-in-charge of
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	Check Post.
SI, No.. -----of R-3 Date upto which the vehicle is to cross Exit Check Post ----- ----- <p style="text-align: center;">Signature and seal of the Officer I/C of Entry Check Post</p>	SI, No.. -----of R-4 Actual date of crossing the Exit Check Post ----- ----- <p style="text-align: center;">Signature and seal of the Officer I/c of Exit Check Post</p>