Department of Value Added Tax

Form DVAT 20

(See Rule 28 of the Daman and Diu Value Added Tax Rules, 2005

Challan for Daman and Diu Value Added Regulation

(Part A – to be retained in the Treasury)

Reserve Bank of India /
State Bank of India
at…….. (Branch)

for the period from ……. ……..
to……

Credited: Consolidated Fund of India

Head: 0040, Value Added Tax Receipts – Value Added Tax Receipts

1. Registration No.											

2. Full Name of Dealer *(For individuals, provide in order of first name, middle name, surname)*																			

3. Dealer's address	Building Name/ Number													
	Area/ Road													
	Locality/ Market													
	Pin Code													

4. Payment on account of	Code	Amount (Rs.)											
(i) Tax													
(ii) Interest													
(iii) Penalty													
(iv) Others													
Total													

Total amount paid (in words) : Rupees _____

Signature of depositor	_____
Name	_____
Position (Eg. Manager, Partner, etc.)	_____
Date (mm/dd/yy)	_____/_____/_____

FOR USE IN TREASURY

Received payment of Rs…….
(Rupees……..)
Date of entry……

TREASURY

SEAL

ACCOUNTANT

Department of Value Added Tax

Form DVAT 20

(See Rule 28 of the Daman and Diu Value Added Tax Rules, 2005)
Challan for Daman and Diu Value Added Tax

(Part B – to be sent to the Value Added Tax Authority by the Treasury)

Reserve Bank of India /
State Bank of India
at…….. (Branch)

for the period from ……. ……..
to……

Credited: Consolidated Fund of India

Head: 0040, Value Added Tax Receipts – Value Added Tax Receipts

1. Registration No.											

2. Full Name of Dealer *(For individuals, provide in order of first name, middle name, surname)*																		

3. Dealer's address	Building Name/ Number													
	Area/ Road													
	Locality/ Market													
	Pin Code													

4. Payment on account of	Code	Amount (Rs.)											
(i) Tax													
(ii) Interest													
(iii) Penalty													
(iv) Others													
Total													

Total amount paid (in words) : Rupees _____

Signature of depositor _____

Name _____

Position (Eg. Manager, Partner, etc.) _____

Date (mm/dd/yy) _____/_____/_____

FOR USE IN TREASURY

Received payment of Rs…….
(Rupees……..)
Date of entry……

TREASURY

SEAL

ACCOUNTANT

Department of Value Added Tax

Form DVAT 20

(See Rule 28 of the Daman and Diu Value Added Tax Rules, 2005)

Challan for Daman and Diu Value Added Tax

(Part C – to be attached by the dealer alongwith return / application)

Reserve Bank of India /
State Bank of India
at…….. (Branch)

for the period from ……. ……..
to……

Credited: Consolidated Fund of India

Head: 0040, Value Added Tax Receipts – Value Added Tax Receipts

1. Registration No.											

2. Full Name of Dealer *(For individuals, provide in order of first name, middle name, surname)*																			

3. Dealer's address	Building Name/ Number													
	Area/ Road													
	Locality/ Market													
	Pin Code													

4. Payment on account of	Code	Amount (Rs.)											
(i) Tax													
(ii) Interest													
(iii) Penalty													
(iv) Others													
Total													

Total amount paid (in words) : Rupees _____

Signature of depositor _____

Name _____

Position (Eg. Manager, Partner, etc.) _____

Date (mm/dd/yy) _____/_____/_____

FOR USE IN TREASURY

Received payment of Rs…….
(Rupees……..)
Date of entry……

TREASURY

SEAL

ACCOUNTANT

Department of Value Added Tax

Form DVAT 20

(See Rule 28 of the Daman and Diu Value Added Tax Rules, 2005)

Challan for Daman and Diu Value Added Tax

(Part D – to be retained by the dealer)

Reserve Bank of India /
State Bank of India
at…….. (Branch)

for the period from ……. ……..
to……

Credited: Consolidated Fund of India

Head: 0040, Value Added Tax Receipts – Value Added Tax Receipts

1. Registration No.											

2. Full Name of Dealer *(For individuals, provide in order of first name, middle name, surname)*																			

3. Dealer's address	Building Name/ Number													
	Area/ Road													
	Locality/ Market													
	Pin Code													

4. Payment on account of	Code	Amount (Rs.)											
(i) Tax													
(ii) Interest													
(iii) Penalty													
(iv) Others													
Total													

Total amount paid (in words) : Rupees _____

Signature of depositor _____

Name _____

Position (Eg. Manager, Partner, etc.) _____

Date (mm/dd/yy) _____/_____/_____

FOR USE IN TREASURY

Received payment of Rs…….
(Rupees……..)
Date of entry……

TREASURY
SEAL ACCOUNTANT