DRAFT

Form VAT - 57

[See Rule 72]

Application for Rectification of Mistake

Read the instructions carefully before filling the form. All the entries should be filled in capital letters

Registration Number

To,

TIN

1. Name of Business
2. Address

   Bldg No/Name/ Area

   Town/City

   District (State)

   Pin Code Email Id

   Telephone Number(s) FAX No.

4. Date of the order sought to be rectified *(DD / MM / YYYY)*
5. Section under which the order is passed _____
6. Have you preferred an appeal against the said order in case the order sought to be rectified has been passed by authorised officer, assessing authority or appellate authority ?

   ☐ Yes ☐ No
7. Grounds for rectification of the said order

   _____

   _____

   _____

Date: Signature

Place: Name :

Status :

Verification

I verify that the above information and its enclosures (if any) is true and correct to the best of my knowledge and belief and nothing has been concealed.

Date : Signature

Place : Name :

Status :

Instructions:

1. Please ensure that the form is complete
2. This Form should be verified and signed by:
   a. Proprietor, in case of Proprietorship concern
   b. Managing Partner, in case of Partnership firm and where there is no Managing Partner, by all the partners if there is no registered partnership deed and in case of a registered partnership deed by any one of them.
   c. Managing Director or authorized signatory, in case of a Company
   d. Karta, in case of Hindu Undivided Family
   e. Authorised Signatory, in all other cases
   f. Or by the declared Business Manager
3. Enclose additional sheet(s) in case this space is not sufficient
4. Enclose all documents/ evidences that you want to be considered