

Form VAT - 57

[See Rule 71]

Application for Rectification of Mistake

Registration No. (TIN)

To

1. Name of Business

2. Address

Bldg No/Name/ Area

Town/City

District (State)

Pin Code

Telephone Number(s)

Email Id

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

Place:

Date:

Name :

Status :

Signature

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.

Place:

Date:

Name :

Status :

Signature

- Instructions:**
1. Read the instructions carefully.

2. All the entries should be filled in capital letters

3. Tick ✓ applicable in option boxes

4. Please ensure that the form is complete

5. 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 Business Manager

6. Enclose additional sheet(s) in case this space is not sufficient

7. Enclose all documents/ evidences that you want to be considered