"Form VAT - 58 [See Rule 72] Application for Reopening of ex-parte assessment

To

	Dy. Commissioner (Adm)							
Zone	:	-aictr	ation	No.	(TINI)	١		
1.	Name of Business	gisti	ation	110.	(1111)	<u>) </u>		
2.	Address							
2.	Bldg. No/Name/ Area							
	Town/City							
	District (State)							
	Pin Code							
3.	Email Id							
4.	Mobile/Fax Number(s)							
5.	Date of the order sought to be reopened	D	D	М	М	Y	Y	
6.	Date of service of the order	D	D	Μ	Μ	Y	Y	
7.	Name of the assessing authority		ı	ı	ı	1	1	
8.	Designation of the assessing							
	authority							
9.	Period of ex-parte assessment							
10.	Section, under which the order is passed							
11.	Have you preferred an appeal against the order?	YES	5		NO			
12.	Date of filing of application	D	D	Μ	Μ	Y	Y	
13.	Grounds for reopening of the said		· I	1	1	ı	•	
	order							
Place: Date:			Signature: Name: Status:					
	Verification							
	I verify that the above information and correct to the best of my knowled een concealed.							
Place Date:			gnatu ame:	ire:				