# [See Rule 104(1)]

# Application Form for Advance Ruling

1.	GSTIN Number, if any/ User-id			
2.	Logal Name of Applicant			
	Legal Name of Applicant			
3.	Trade Name of Applicant (Optional)			
4.	Status of the Applicant [registered			
~	/ un-registered]			
5.	Registered Address / Address provided while obtaining user id			
6.	Correspondence address, if different from above			
7.	Mobile No. [with STD/ISD code]			
8.	Telephone No. [with STD/ISD code]			
9.	Email address			
10.	Jurisdictional Authority	< <name, address="" designation,="">&gt;</name,>		
11.	i. Name of Authorised representative	Optional		
	ii. Mobile No.	iii. Email Address		
12.	Nature of activity(s) (proposed / present) in respect of which advance ruling sought			
	A. Category			
	Factory / Manufacturing	Wholesale Business	Retail Business	
	Warehouse/Deport	Bonded Warehouse	Service Provision	
	Office/Sale Office	Leasing Business	Service Recipient	
	EOU/ STP/ EHTP	SEZ	Input Service Distributor (ISD)	
	Works Contract			
	B. Description (in brief)			
		(Provision for file attachment also)		
13.	Issue/s on which advance ruling requ	ng required (Tick whichever is applicable) :-		
	(i) classification of goods and/or services or both			
	(ii) applicability of a notification			

	issued under the provisions of the Act			
	(iii) determination of time and value of supply of goods or services or both			
	(iv) admissibility of in put tax credit of tax paid or dee med to have been paid			
	(v) determination of the liability to pay tax on any goods or services or both			
	(vi) whether applicant is required to be registered under the A ct			
	(vii) whether any particul ar thing done by the applicant with respect to any goods and/or serv ices or both amounts to or resul ts in a supply of goods and/or services or both, within the meaning of that term			
14.	Question(s) on which advance ruling is required			
15.	Statement of relevant facts having a bearing on the question(s) raised.			
16.	Statement containing the applicant's interpretation of law and/or facts, as the case may be, in respect of the aforesaid que stion(s) (i.e. applicant's view point and submissions on issues on which the advance ruling is sought).			
17.	I hereby declare that the question rais	sed in the application is not (tick) -		
		edings in the applicant's case under any of the provisions of the Act edings in the applicant's case under any of the provisions of the Act		
18.	Payment details	Challan Identification Number (CIN) – Date -		

### VERIFICATION

Signature

Name of Applicant/Author ised Signatory

Designation/Status

Date \_\_\_\_\_

Place \_\_\_\_\_

## Form GST ARA -02 [See Rule 106(1)] Appeal to the Appellate Authority for Advance Ruling

Sr. No.	Particulars	Remarks		
1	Advance Ruling No.			
2	Date of communication of the advance ruling	DD/MM/YYYY		
3	GSTIN / User id of the appellant			
4	Legal Name of the appellant.			
5	Trade Name of the appellant (optional).			
6	Address of appellant at which notices may be sent			
7	Email Address of the appellant			
8	Mobile number of the appellant			
9	Jurisdictional officer / concerned officer			
10	Designation of jurisdictional officer / concerned officer			
11	Email Address of jurisdictional officer / concerned officer			
12	Mobile number of jurisdictional officer / concerned officer			
13	Whether the appellant wishes to be heard in person?	Yes/No		
14.	The facts of the case (in brief)			
15.	Ground of Appeal			
16.	Payment details	Challan Identification Number (CIN) – Date -		
	Prayer			
	<ul> <li>In view of the foregoing, it is respectfully prayed that the Ld. Appellate Authority, <place> may be pleased to:</place></li> <li>a. set aside/modify the impugned advance ruling passed by the Authority for Advance Ruling as prayed above;</li> <li>b. grant a personal hearing; and</li> <li>c. pass any such further or other order (s) as may be deemed fit and proper in facts and circumstances of the case.</li> <li>And for this act of kindness, the appellant, as is duty bound, shall ever pray.</li> </ul>			

#### VERIFICATION

I, \_\_\_\_\_\_ (name in full and in block letters), son/daughter/wife of \_\_\_\_\_\_ do hereby solemnly declare that to the best of my knowledge and belief what is stated above and in the annexure(s), including the documents is correct. I am making this application in my capacity as \_\_\_\_\_\_ (designation) and that I am competent to make this application and verify it.

Signature

Place \_\_\_\_\_

Date\_\_\_\_\_

Name of Appellant/Authorised Signatory

Designation/ Status

## Form GST ARA -03 [See Rule 106(2)] Appeal to the Appellate Authority for Advance Ruling

Sr. No.	Particulars	Remarks	
1	Advance Ruling No.		
2	Date of communication of the advance ruling	DD/MM/YYYY	
3	GSTIN, if any / User id of the person who had sought advance ruling		
4	Legal Name of the person referred to in serial number 3.		
5	Name and designation of jurisdictional officer / concerned officer		
6	Email Address of jurisdictional officer / concerned officer		
7	Mobile number of jurisdictional officer / concerned officer		
8	Whether the jurisdictional officer / concerned officer wishes to be heard in person?	Yes/No	
9.	Facts of the case (in brief)		
10.	Grounds of Appeal		
	Prayer		
	<ul> <li>In view of the foregoing, it is respectfully prayed that the Ld. Appellate Authority,</li> <li><place> may be pleased to:</place></li> <li>a. set aside/modify the impugned advance ruling passed by the Authority for Advance Ruling as prayed above;</li> <li>b. grant a personal hearing; and</li> <li>c. pass any such further or other order (s) as may be deemed fit and proper in facts and circumstances of the case.</li> </ul>		

#### VERIFICATION

I, \_\_\_\_\_\_ (name in full and in block letters), son/daughter/wife of \_\_\_\_\_\_ do hereby solemnly declare that to the best of my knowledge and belief what is stated above and in the annexure(s), including the documents are correct. I am making this application in my capacity as \_\_\_\_\_\_ (designation) and that I am competent to make this application and verify it.

Place \_\_\_\_\_ Signature
Place \_\_\_\_\_ Name and designation of the concerned
officer / jurisdictional officer
Date\_\_\_\_\_