

**FORM VAT- M1**

(See rule 63)

**Form of memorandum of appeal to the appellate authorities other than the Tribunal, under section 33 of the Haryana Value Added Tax Act,2003.**

(Space for court fee stamp)

Value of court fee stamps affixed.....

Before Jt. Excise and Taxation Commissioner (Appeals)/ Excise and Taxation Commissioner, Haryana

No..... of .....20.....

(To be filled in by the office of the Joint Excise &Taxation Commissioner(Appeals)/Excise and Taxation Commissioner, Haryana.)

M/s..... Appellant

Versus

Assessing Authority/Taxing Authority.....(District) Respondent

The .....day of.....20.....

1. Assessment year.....
2. Authority passing the order appealed against.....
3. Date of the order appealed against.....
4. Date of communication of the order appealed against.....
5. Address to which notice may be sent to the appellant.....
6. Relief claimed in appeal:-
  - a. Turnover determined by the Assessing Authority.....
  - b. If turnover is disputed
    - (i) disputed turnover.....
    - (ii) tax due on the disputed turnover.....
  - c. if rate of tax is disputed
    - (i) turnover involved.....
    - (ii) amount of tax disputed.....
  - d. Any other relief claimed.....
7. The appellant has paid the tax assessed, interest levied and penalty imposed under the order appealed against as shown below:-

	Amount Paid before assessment	Paid after assessment			Balance due, if any, at the time of filing of appeal Amount
		Amount	Treasury Receipt No.	Date	
(i) Out of admitted tax & interest.					
(ii) Out of disputed tax, interest & penalty					

8. Grounds of appeal (may be recorded in a separate sheet if the space is insufficient).

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Signatures of appellant or his  
Authorized agent

**Verification**

I/We..... appellant(s) named in the above memorandum of appeal do hereby declare that what is stated herein is true and correct to the best of my/our knowledge and belief.

Verified today the ..... day of.....20.....

Signatures of appellant or his  
Authorized agent

For use in the office of the authority concerned

(office seal)

Receipt No. ....

Date of receipt .....

Signature of receiving  
officer/official.....

Name : .....

**Acknowledgment**

Received from M/s..... of district ..... R.C.  
No.(if any) ..... appeal alongwith the enclosures mentioned therein.

Place: .....

Date: .....

Signature of receiving  
officer/official with seal .....

(office seal)