GOODS AND SERVICES TAX RULES, 2017 ASSESSMENT FORMATS

Sr No.	Form No.	Title of the Form
1.	Form GST ASMT – 01	Application for Provisional Assessment u/s 60
2.	Form GST ASM – 02	Notice for Seeking Additional Information / Clarification / Documents for provisional/ Final assessment
3.	Form GST ASMT – 03	Reply to the notice seeking additional information
4.	Form GST ASMT – 04	Order of Acceptance or Rejection of Provisional Assessment Order
5.	Form GST ASMT – 05	Furnishing of Security
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[See rule ----] Application for Provisional Assessment under section 60

1.GSTIN	
2. Name	
3. Address	

Sr. No.	HSN/SAC		Tax rate			Valuation	e	
		commodity /service	Central tax	State/ UT tax	Integrated tax	Cess		monthly turnover of the commodity / service
1	2	3	4	5	6	7	8	9
5. Reaso	n for seeking p	provisional assessmen	ıt					
6. Docun	nents filed							

7. Verification-

I ______ hereby solemnly affirm and declare that the information given hereinabove is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.

Signature of Authorized Signatory Name

Designation / Status ------Date -----

[See rule ----]

Reference No.:

Date:

То

GSTIN

-----Name

_____(Address)

Application Reference No. (ARN)

Dated

Notice for Seeking Additional Information / Clarification / Documents for provisional assessment

Please refer to your application referred to above. While examining your request for provisional assessment, it has been found that the following information/documents are required for processing the same:

<< text >>

You are, therefore, requested to provide the information /documents within a period of << 15 days>> from the date of service of this notice to enable this office to take a decision in the matter. Please note that in case no information is received by the stipulated date your application is liable to be rejected without any further reference to you.



You are requested to appear before the undersigned for personal hearing on << Date ---Time ---Venue --->>.

Signature

Name

[See rule ----] **Reply to the notice seeking additional information**

1. GSTIN		
2. Name		
3. Details of notice vide which additional information sought	Notice No.	Notice date
4. Reply		
5. Documents filed		

6. Verification-

I ______ hereby solemnly affirm and declare that the information given hereinabove is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.

Signature of Authorized Signatory

Name Designation / Status ------Date

[See rule ----]

Reference No.:

Date

То

GSTIN -

Name -

Address -

Application Reference No. (ARN) Dated

Order of Provisional Assessment

This has reference to your application mentioned above and reply dated------, furnishing information/documents in support of your request for provisional assessment. Upon examination of your application and the reply, the provisional assessment is allowed as under:

<< text >>

Please note that if the bond and security are not furnished within the stipulated date, the provisional assessment order will be treated as null and void as if no such order has been issued.

Signature

Name

[See rule ----] Furnishing of Security

1. GSTIN						
2. Name						
3. Order	3. Order vide which security is prescribed			0.	Order	date
4. Detail	s of the securit	ty furnished				
Sr. No.	Mode	Reference no. / Debit entry no. (for cash payment)	Date	Amount		Name of Bank
1	2	3	4	5		6

Note – Hard copy of the bank guarantee and bond shall be submitted on or before the due date mentioned in the order.

- 5. Declaration -
 - (i) The above-mentioned bank guarantee is submitted to secure the differential tax on the supply of goods and/or services in respect of which I/we have been allowed to pay taxes on provisional basis.
 - (ii) I undertake to renew the bank guarantee well before its expiry. In case I/We fail to do so the department will be at liberty to get the payment from the bank against the bank guarantee.
 - (iii) The department will be at liberty to invoke the bank guarantee provided by us to cover the provisional assessment in case we fail to furnish the required documents/ information to facilitate finalization of provisional assessment.

Signature of Authorized Signatory

Name Designation / Status ------Date ------

Bond for provisional assessment

(Rule)

I/We......of........,hereinafter called "obligor(s)", am/are held and firmly bound to the President of India (hereinafter called "the President"/ the Governor of(State) (hereinafter called the "Governor") in the sum of......rupees to be paid to the President/ Governor for which payment will and truly to be made. I/We jointly and severally bind myself/ourselves and my/our respective heirs/ executors/ administrators/ legal representatives/successors and assigns by these presents; Dated this.......day of......

and whereas the obligor desires that the provisional assessment in accordance with the provisions of Section 60 be made;

The condition of this bond is that the obligor and his representative observe all the provisions of the Act in respect of provisional assessment under section 60;

And if all dues of Integrated tax/ Central tax/ State tax/ Union territory tax or other lawful charges, which shall be demandable after final assessment, are duly paid to the Government along with interest, if any, within thirty days of the date of demand thereof being made in writing by the said Officer, this obligation shall be void;

OTHERWISE and on breach or failure in the performance of any part of this condition, the same shall be in full force and virtue:

AND the President/ Governor shall, at his option, be competent to make good all the loss and damages from the amount of bank guarantee or by endorsing his rights under the above-written bond or both;

I/We further declare that this bond is given under the orders of the Central Government/ State Government for the performance of an act in which the public are interested;

IN THE WITNESS THEREOF these presents have been signed the day hereinbefore written by the obligor(s).

Signature(s) of obligor(s). Date : Place :	
Witnesses	
(1) Name and Address	Occupation
(2) Name and Address	Occupation
Date	
Place	
Witnesses	
(1) Name and Address	Occupation
(2) Name and Address	Occupation

Accepted by me this	day of	(month)	(year)
		of	(Designation)
		for and on behalf	of the President of
	I	India./ Governor of	(state)".

[See rule ----]
Reference No.: Date:
To
GSTIN Name Address Application Reference No. (ARN) Date
Provisional Assessment order no. Date ----

Notice for seeking additional information / clarification / documents for final assessment

Please refer to your application and provisional assessment order referred to above. The following information / documents are required for finalization of provisional assessment:

<< text >>

You are, therefore, requested to provide the information /documents within a period of << 15 days>> from the date of receipt of this notice to enable this office to take a decision in the matter. Please note that in case no information is received by the stipulated date your application is liable to be rejected without making any further reference to you.

 \square

You are requested to appear before the undersigned for personal hearing on << Date ---Time ---Venue --->>.

Signature

Name

[See rule----]

Reference No.:

Date

То

GSTIN Name Address

Provisional Assessment order No.

dated

Final Assessment Order

Preamble - << Standard >>

In continuation of the provisional assessment order referred to above and on the basis of information available / documents furnished, the final assessment order is issued as under:

Brief facts – Submissions by the applicant -Discussion and finding -

Conclusion and order -

The security furnished for the purpose can be withdrawn after compliance with the order by filing an application.

Signature Name

[See rule ----]

Application for Withdrawal of Security

1. GSTIN						
2. Name						
3. Details vide which security furnished				ARN Date		
4. Details of the security to be withdrawn						
				-	-	
Sr. No.	Mode	Reference no. / Debit entry no. (for cash payment)	Date	Amount	Name of Bank	
1	2	3	4	5	6	

5. Verification-

I ______ hereby solemnly affirm and declare that the information given hereinabove is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.

Signature of Authorized Signatory

Name

Designation / Status -

Date -

[See rule----]

Reference No.:

Date

То

_____ GSTIN ------ Name _____ Address

Application Reference No.

dated

Order for release of security or rejecting the application

This has reference to your application mentioned above regarding release of security amounting to Rs. ------ [------ Rupees (in words)]. Your application has been examined and the same is found to be in order. The aforesaid security is hereby released. **Or** Your application referred to above regarding release of security was examined but the same was not found to be in order for the following reasons:

<< text >>

Therefore, the application for release of security is rejected.

Signature Name Designation Date [See rule ----]

Reference No.:

To_____

GSTIN:

Name :

Address :

Tax period -

F.Y. -

Date:

Notice for intimating discrepancies in the return after scrutiny

This is to inform that during scrutiny of the return for the tax period referred to above, the following discrepancies have been noticed:

<< text >>

You are hereby directed to explain the reasons for the aforesaid discrepancies by -------(date). If no explanation is received by the aforesaid date, it will be presumed that you have nothing to say in the matter and proceedings in accordance with law may be initiated against you without making any further reference to you in this regard.

Signature

Name

[See rule ----]

Reply to the notice issued under section 61 intimating discrepancies in the return

1. GSTIN				
2. Name				
3. Details of	of the notice	Referen	ce No.	Date
4. Tax Period				
5. Reply to	the discrepancies			
Sr. No.	Discrepancy			Reply

6. Amount admitted and paid, if any -

Act	Tax	Interest	Others	Total

7. Verification-

I ______ hereby solemnly affirm and declare that the information given hereinabove is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.

Signature of Authorized Signatory

Name

Designation / Status ------

Date –

[See rule ----]

Reference No.:

Date:

То

GSTIN Name Address

Tax period -	F.Y
ARN -	Date -

Order of acceptance of reply against the notice issued under section 61

This has reference to your reply dated ------ in response to the notice issued vide reference no. ------- dated ---- . Your reply has been found to be satisfactory and no further action is required to be taken in the matter.

Signature Name Designation

	[See rule]	
Reference No.:		Date:
То		
GSTIN -		
Name -		
Address -		
Tax Period -	F.Y. –	Return Type -
Notice Reference No		Date -

Assessment order under section 62

Preamble - << standard >>

The notice referred to above was issued to you under section 46 of the Act for failure to furnish the return for the said tax period. From the records available with the department, it has been noticed that you have not furnished the said return till date.

Therefore, on the basis of information available with the department, the amount assessed and payable by you is as under:

Introduction Submissions, if any Discussions and Findings Conclusion Amount assessed and payable (Details at Annexure):

(Amount in Rs.)

Sr. No.	Tax Period	Act	Tax	Interest	Penalty	Others	Total
1	2	3	4	5	6	7	8
Total							

Please note that interest has been calculated upto the date of passing the order. While making payment, interest for the period between the date of order and the date of payment shall also be worked out and paid along with the dues stated in the order.

You are also informed that if you furnish the return within a period of 30 days from the date of service of this order, the order shall be deemed to have been withdrawn; otherwise,

proceedings shall be initiated against you after the aforesaid period to recover the outstanding dues.

Signature Name Designation

[See rule ----]

Reference No:

Date:

То

Name Address

Tax Period --

F.Y. -----

Show Cause Notice for assessment under section 63

It has come to my notice that you/your company/firm, though liable to be registered under section ----- of the Act, have/has failed to obtain registration and failed to discharge the tax and other liabilities under the said Act as per the details given below:

Brief Facts – Grounds – Conclusion -

OR

It has come to my notice that your registration has been cancelled under sub-section (2) of section 29 with effect from ----- and that you are liable to pay tax for the above mentioned period.

Therefore, you are hereby directed to show cause as to why a tax liability along with interest not be created against you for conducting business without registration despite being liable for registration and why penalty should not be imposed for violation of the provisions of the Act or the rules made thereunder.

In this connection, you are directed to appear before the undersigned on ------ (date) at ------ (time)

Signature Name Designation [See rule ----]

Reference No .:

Date:

То

Temporary ID

Name

Address

Tax Period -

F.Y. –

SCN reference no. -

Date -

Assessment order under section 63

Preamble - << standard >>

The notice referred to above was issued to you to explain the reasons for continuing to conduct business as an un-registered person, despite being liable to be registered under the Act.

OR

The notice referred to above was issued to you to explain the reasons as to why you should not pay tax for the period as your registration has been cancelled under subsection (2) of section 29 with effect from-----

Whereas, no reply was filed by you or your reply was duly considered during proceedings held on ------ date(s).

On the basis of information available with the department / record produced during proceedings, the amount assessed and payable by you is as under:

Introduction

Submissions, if any

Conclusion (to drop proceedings or to create demand)

Amount assessed and payable:- (details at Annexure)

(Amount in Rs.)

Sr No.	Tax Period	Act	Tax	Interest	Penalty	Others	Total
1	2	3	4	5	6	7	8
Total							

Please note that interest has been calculated upto the date of passing the order. While making payment, interest for the period between the date of order and the date of payment shall also be worked out and paid along with the dues stated in the order.

You are hereby directed to make the payment by << date >> failing which proceedings shall be initiated against you to recover the outstanding dues.

Signature Name

[See rule ----]

Reference No.:

То

GSTIN/ID

Name

Address

Tax Period - F.Y. –

Assessment order under section 64

Preamble - << standard >>

Therefore, I proceed to assess the tax due on such goods as under:

Introduction

Discussion & finding

Conclusion

Amount assessed and payable (details at Annexure)

(Amount in Rs.)

Sr. No.	Tax Period	Act	Tax	Interest, if any	Penalty	Others	Total
1	2	3	4	5	6	7	8
Total							

Please note that interest has been calculated upto the date of passing the order. While making payment, interest for the period between the date of order and the date of payment shall also be worked out and paid along with the dues stated in the order.

You are hereby directed to make the payment by << date >> failing which proceedings shall be initiated against you to recover the outstanding dues.

Signature Name

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Date:

[See rule ----]

Application for withdrawal of assessment order issued under section 64

1. GSTIN /ID							
2. Name							
3. Details of the order	Reference No.	Date of issue of order					
4. Tax Period, if any							
5. Grounds for withdrawal							
6. Verification-							
Ι	hereby soler	hereby solemnly affirm and declare that the					
information given hereinabove is true and correct to the best of my knowledge and belief and							
nothing has been concealed therefrom.							
Signature of Authorized Signatory							
Name							
Designation / Status							
Date -							

[See rule ----]

Reference No.:

GSTIN/ID

Name

Address

ARN - Date –

Acceptance or Rejection of application filed under section 64 (2)

The reply furnished by you vide application referred to above has been considered and found to be in order and the assessment order no. ------ dated ------ stands withdrawn.

OR

The reply furnished by you vide application referred above has not been found to be in order for the following reasons:

<<Text box>>

Therefore, the application filed by you for withdrawal of the order is hereby rejected.

Signature

Name

Designation

Date: