FORM T-7

REFUND VOUCHER

[See rule 11 (3)]

Book No. ........................................... Book
No. .............................................
Voucher No. ................................. Voucher
No. .............................................

Government of Himachal Pradesh

Refund Order

Refund Order

Order for refund of tax or penalty
Refund payable to ......................... Payable at the State Bank of
India/ State ........................................... Bank of Patiala
within three months of the
....................................................... date of issue.

Tax/Penalty realised vide Receipt-in-
Form 'T-1' or Challan-in-Form 'T-2'
....................................................... (No. and date).

Date of order directing refund.......... To
Amount of refund.............................

Number in Daily Collection Register
Showing collections of amount
of Patiala,
Regarding which refund is made..........
....................................................... 1. Certified that with reference
to the tax/
....................................................... penalty realised vide Receipt in
Form 'T-1' or
Date of deposit of amount ............... Challan-in- Form 'T-2'
.......................................................
Name of Treasury/ Sub Treasury in which
Deposited

(No. and Date)


Total amount deposited out of order which refund is ordered. question has

2. Certified that the tax/ penalty concerning which this refund is ordered has been credited in the treasury on ........................................ under the head ............................................................

3. Certified that no refund regarding the sum now in previously been issued and this order of refund has been entered in register of application for refund under my signatures.

Signature of the taxing authority/ Assistant Excise and Taxation Commissioner or the Excise and Taxation Officer, Incharge of the District/ Deputy Excise and Taxation Commissioner.

Signature of recipient of the Voucher 4. Please pay to Shri ........................................ (Name of the claimant) ........................................ Date of encashment in the State Bank of ........................................ (Rupees ........................................)

(Rupees ........................................)

On account of the above refund.
Place........................................................................

Dated......................................................................

Note:- A note to this effect has been kept in the Daily Collection Register to avoid double Payment.

(Signature with seal)
Taxing authority/ Assistant Excise and Taxation Commissioner or the Excise and Taxation Officer, Incharge of the District/ Deputy Excise and Taxation Commissioner.

(Signature with seal)
Received payment..............................

........................................................................

Rs................................................................. Assistant Excise
and Taxation Commissioner or the
........................................................................

Excise & Taxation Officer, Incharge only.
of the District/ Deputy Excise and
signature..................................................
Taxation....................................................... Claimant’s
........................................................................

.................................................................
Signature of the Officer incharge
of the Bank.

Date.........................................................
Date........................................................