FORM VAT-XXVI-A

[See rule 61 (1)]

DECLARATION

Original
Duplicate
Triplicate

				T	'riplicate	į	
FT NT	GC				IM EX	RE	
1. Form No			Name				
2. CONSIGNOR:			Full address				
			TIN (VAT/CS	ST)			
3. Consigned from :			Place				
4. CONSIGNEE:			Name				
			Full address				
			TIN (VAT/CST).				
5. Destinati	on of Goo	ods					
	6. Vehicle No						
	7. Value of Goods: RsG.R. No						
8. Details of Goods (Give details overleaf in case of Multiple Bills)							
Bill No.	Date	Aggregate valu	ue of goods	Brief	Descript	ion of	
		Rs.		Goods.	_		
1.	2.	3.		4.			
Signature of	of Officer-i	in-charge of the	Signature or thumb impression, name				
Check Post	/Barrier w	ith stamp to be	and address of the person				
appended after the checking.			transporting the goods.				
Name of th	e check-po	st/barrier.		_			
Date	Date Date						
		. 1 111 01 11		1 2 1			
<i>Note</i> 1. T	<i>Note.</i> 1. The complete bill of lading is to be in the hand of the person						
	carrying the goods at the check-post or barrier.						

2. Please see instructions *overleaf.

Bill	Date of Bill	Value of goods	Brief description of goods
No.			
Total	Total value of goods:		

INSTRUCTIONS

A. Guidelines for filling the	
CST/ VAT TIN	
1. If un-registered Dealer:	DistrictUNR.blank.
2. If applied for	DistrictAFR-blank.
registration	
3. If registered	District No
B. Tick $()$ wherever applicable;	
FT= Goods for Trade	IM= Goods Imported
NT=Goods Not for Trade	EX= Goods Exported
GC=Government Goods	RE= Goods RE-Entered.