Form DVAT 38

[See Rule 52]

Objection Form under Delhi Value Added Tax Act, 2004

To The									
Registration Number									
2. Full Name of the Deal	er								
3. Address	. Address								
Contact Telephone Number(s)									
5 N. 611 11									
5. Nature of objection Places attach copy of Assessment, order or decision									
Please attach copy of Assessment, order or decision objected against									
3									
Tax period to which the objection pertains				//-	to				
7. Date of issue of Asse	sement	order or decision		DD / MM / /	/ YYYY —— —— ——				
Date of issue of Assessment, order or decision objected against				DD / MM / YYYY					
8. Date of service of Assessment, order or decision — — / — — / —									
objected against	DD / MM / YYYY								
Is the objection filed w (Please tick)									
10 If the objection is not filed within time, attach Form DVAT 39.									
11. Is the objection against an assessment?									
12. If yes, then specify the amount of assessment									
13. Specify the amount of said assessment that is not									
disputed (Please attach proof of payment of said									
amount)									
14. Specify the amount of said assessment that is									
objected against	I	Tayahla turnayar	Toy (Po.)	Interest (Pa.)	Donalty (Pa.)	Total (Pa.)			
		Taxable turnover (Rs.)	Tax (Rs.) (i)	Interest (Rs.) (ii)	Penalty (Rs.) (iii)	Total (Rs.) (i + ii + iii)			
As assessed	Α	. ,	.,	,	. ,	•			
As admitted by appellant	В								
Amount in dispute	A-B								

15.	Do you want a hearing?	☐ Yes	☐ No				
16.	Please state fully and in detail the grounds on which for a hearing.	you are objecting. This	must be done even if you have requested				
	Attach additional sheet(s) in case you are not able to	o provide all details in thi	is space				
	Attach all documents/ evidence that you want to be considered regarding your objection						
47	Discourse the Est of continuous						
17.	Please annex the list of enclosures						
18.	Verification						
I/We any	e hereby solemnly affirm and dec is true and correct to the best of my/our knowledge a		given in this form and its attachments (if as been concealed therefrom.				
Auth	norised Signatory						
Nan	ne						
Des	ignation						
Plac	e						
Date	Date						

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