FORM VAT-57
(See Rule 71)
APPLICATION FOR RECTIFICATION OF MISTAKE

Regn. No.(TIN.....)
Asstt.Year :

The Assistant Commissioner,
Circle `H`, Jaipur

1. Name of Business :

2. Address :

3. Date of the order
Sought to be rectified :

4. Section under which
The order is passed :

5. Have you preferred an appeal against the said order in case the order sought to be rectified has been passed by authorized officer, assessing authority or appellate authority ?

6. Grounds for rectification of the said order : -

It is, therefore, humbly requested that kindly carryout the above rectification and the demand be reduced to NIL & oblige.

Place :
DATE :

SIGNATURE :
NAME :
STATUS :

VERIFICATION

I verify that the above information and its enclosures (if any) is true and correct to the best of my knowledge and belief and nothing has been concealed.

Place :
DATE

SIGNATURE :
NAME
STATUS : ADVOCATE