$\underline{Annexure - B}$

Certification of VAT and CST liability ACCOMPANIMENT TO FORM NO. II OF THE APPLICATION FOR IPS under PACKAGE SCHEME OF INCENTIVES

	(To be cert	ified by Chartered Ac	ecountant)
	(For the period from	to	of Financial Year)
1.	Name of the eligible unit :		
2.	Address of the eligible unit	:	
3.	No. and date of Eligibility Certificate.	: No	Date
4.	Authority which has issued the Eligibility Certificate.	;	
5.	Identification Certficate:	No	Date
6.	Registration number with d	ate and date of effect.	
	a) Under MVAT Act 2002	: TIN No	Date
		Date of Effect:	
	b) Under Central Sales Tax	: TIN No	Date
	Act, 1956.	Date of Effect:	
7.	Location at which MVAT r	eturns are filed:	
8.	Details of sale of Finished I	Product of eligible uni	it and Taxes paid thereon.
A) Sa	ale within the State		(A11 1 : D)

(All value in Rs.)

Sr No	Finished Product /s	Details		VAT Payable	
		Qty. Value		Rate	Amount
1	2	3	4	5	6
Total					

B) Sale outside the State

Sr No	Finished Product/s	Details		CST Payable at	
				prevailing rate	
Total		Qty.	Value	Rate	Amount
1	2	3	4	5	6

C) Branch Transfer

Sr	Finished Product/s	Details	
No			
		Qty.	Value
1	2	3	4

D) Value of Exports:

E) Total of A+B+C+D

Sr. No	Finished Product/s	Details		Tax Payable
		Qty.	Value	
1	2	3	4	5
Total				

9. Details of Raw Material purchased for manufacture of Finished Product of eligible unit and Taxes paid thereon.

A) Purchases within the State

Sr No	Rate of Tax	Net Value of Purchase	VAT Paid
1	2	3	4
Total			

- B) Value of Purchase from outside the State:
- C) Value of Purchases by way of Branch Transfer:
- D) Value of Imports
- E) Total
 - a) Value of Purchases (A+B+C+D)
 - b) Value of Tax paid
 - i) VAT paid:
 - ii) Entry Tax Paid:
 - iii) Total (i + ii):

10.	Set-off admissible on tax paid on Purchases :						
11.	Total Taxes Payable (VAT + CST):						
12.	Amount of IPS Receivable -25% of amount at $(11-10)$:						
13.	Details o period	Details of total taxes paid for the above : period					
	Sr. No.	Date	Amount of Tax	Name of Bank & Branch	MVAT / CST		
	Total						
				Yours faith	nfully,		
		Name, Status and Signature of the Authorised Signatory					
			Status	: Proprietor / Partr Managing Directo			
(This	application	n shall be signed	by any one of the I	persons indicated a	above.)		
<u>To b</u>	oe issued by	y the Competent	Certificate person authorised	to sign VAT audit	report in Form 704		
other		nereby certify the records of the ap		nation of the Boo	ok of Accounts and		
that t		ents made and pa	•	l herein are correc	t to the best of my /		
to ex	uction and tent of Net	sale of the eligib VAT paid by E y Certificate Nu	le unit and Industr ligible Unit at	ial Promotion Sub	re only in respect of sidy claimed is only for Package Scheme of		
		separate account	the applicant M/s. s and records of ex		Para applicable for		
	Rubber Sta	•		Signature Auditor			

Date:

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