**FORM 413**

(*See* rule 47)

***Application for refund under sub-section (6) of section 32 of the Maharashtra Value Added Tax Act, 2002***

To

---------------------------------------------

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I/We, the undersigned, do hereby apply for the refund being the amount collected from me/the said \_\_\_\_\_\_\_\_\_\_

in contravention of section 60 of the Maharashtra Value Added Tax Act,2002 . The details are as follows: -

* Name of the dealer / the person applying for refund)

2 R.C. No. under M.V.A.T. Act, 2002 if any,

* Address of the dealer / Applicant

4 Amount of refund

* Name of the dealer who has collected tax in contravention of section 60 of the MVAT Act, 2002

6 R.C. No. under M.V.A.T. Act, 2002

* Address of the place of business

The dealer, whose place of business is situated in your jurisdiction, has collected tax in contravention of

|  |  |  |
| --- | --- | --- |
| section 60, the details of which are as follows: - |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date of Purchase** | **Purchase Invoice** | **Amount of tax collected** | **Tax actually leviable, if any** | **Amount of tax collected in contravention of section 60** |
| 1 | 2 | 3 | 4 | 5 |
|  |  |  |  |  |
| **Total** |  |  |  |  |

The amount of tax collected Rupees \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_has actually been deposited by the said M/s \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_in

 Government Treasury under chalan no. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ dated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Receipted copies

have been submitted to you by the said dealer as per the attached certificate. “I declare that I have not resold the goods

 within a period of two years from the date of purchase and have not claimed set-off in respect of the said purchases”

I/ We enclose herewith a certificate from the said M/s\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

in support of the above statement.

|  |  |  |  |
| --- | --- | --- | --- |
| Place ü |  | Signature |  |
| Date |  | Status |  |
|  |  |
|  |  |  |  |

- 2 -