Annexure - A

BANK ACCOUNT DETAILS OF THE ASSESSEE TO WHICH THE SANCTIONED REFUND/ REBATE AMOUNT IS TO BE DEPOSITED.

1. Applicant's firm details

	******************	**********	***********	***************************************	
•				.Mob No:	
				x No:	
	Central Excise	e/ Service T	ax Regn No	0:	
				••	
2.	Bank Particul	<u>ars</u>			
	Name of the E	Bank	:		
	Branch Addre	ess	:	***************************************	
	Bank Account	number	: .	***************************************	
	IFSC Code		:	********	
	MICR Code		•	***************************************	
	Type of Bank	Account	:	***************************************	
				ed above is true and correct to the	
best of my/o furnished in	ur knowledge the application	and belief. n if found i	I / we full ncorrect or		on
best of my/o furnished in any penal ac	ur knowledge the application	and belief. n if found i	I / we full ncorrect or	y understand that any information false will render me/ us liable for	on
best of my/o furnished in any penal ac	ur knowledge the application	and belief. n if found i	I / we full ncorrect or	y understand that any information false will render me/ us liable for	on
best of my/o furnished in any penal ac	ur knowledge the application	and belief. n if found i	I / we full ncorrect or	y understand that any information false will render me/ us liable for	on
best of my/o furnished in any penal ac warranted.	ur knowledge the application	and belief. n if found i	I / we full ncorrect or	y understand that any information false will render me/ us liable for the prescribed in law or otherwise.	on
best of my/o furnished in any penal ac warranted. Place:	ur knowledge the application	and belief. n if found i	I / we full ncorrect or	y understand that any information false will render me/ us liable for the prescribed in law or otherwise Signature:	on
best of my/o furnished in any penal ac warranted. Place:	ur knowledge the application	and belief. n if found i	I / we full ncorrect or ces as may	y understand that any information false will render me/ us liable for the prescribed in law or otherwise. Signature: Name: Designation:	on
best of my/o furnished in any penal ac warranted. Place:	ur knowledge the application tion or other	and belief. If found it consequence	I / we full ncorrect or ces as may	y understand that any information false will render me/ us liable for the prescribed in law or otherwise. Signature: Name: Designation:	on
best of my/o furnished in any penal ac warranted. Place:	ur knowledge the application tion or other	and belief. If found it consequence	I / we full ncorrect or ces as may	y understand that any information false will render me/ us liable for the prescribed in law or otherwise. Signature: Name: Designation:	on
best of my/o furnished in any penal ac warranted. Place:	ur knowledge the application tion or other	and belief. If found it consequence	I / we full ncorrect or ces as may	y understand that any information false will render me/ us liable for the prescribed in law or otherwise. Signature: Name: Designation: fication rrect as per the bank records.	on or se
best of my/o furnished in any penal ac warranted. Place:	ur knowledge the application tion or other	and belief. If found it consequence	I / we full ncorrect or ces as may	y understand that any information false will render me/ us liable for the prescribed in law or otherwise. Signature: Name: Designation: fication rrect as per the bank records. Signature:	on or se
best of my/o furnished in any penal ac warranted. Place:	ur knowledge the application tion or other	and belief. If found it consequence ove details a	I / we full ncorrect or ces as may Bank Verine found con	y understand that any information false will render me/ us liable for the prescribed in law or otherwise. Signature: Name: Designation: fication rrect as per the bank records. Signature: Name: Name:	on or se
best of my/o furnished in any penal ac warranted. Place:	ur knowledge the application tion or other	and belief. If found it consequence ove details a	I / we full ncorrect or ces as may Bank Verine found con	y understand that any information false will render me/ us liable for the prescribed in law or otherwise. Signature: Name: Designation: fication rrect as per the bank records. Signature:	on or se

Note: Al information are mandatory.

Annexure - 'B'

Particulars of Refund/ Rebate Sanctioned beneficiaries.

(In Rs.)

SL	Name & Address of the Claimant	Refund/ Rebate Amounts	Regn. No. of the Claimant	Bank A/C No.	Address of Bank	IFSC Code	Remarks

Signature:

AC/DC: