

Government of India /State
Department of....
FORM-GST-RFD-01
[See rule-----]
Refund Application Form

1. GSTIN:
2. Name :
3. Address:
4. Tax Period: From <DD/MM/YY> To <DD/MM/YY>
5. Amount of Refund Claimed :

	Tax	Interest	Penalty	Fees	Others	Total
IGST						
CGST						
SGST						
Total						

6. Grounds of Refund Claim: (selected from the drop down)
 - a. Excess balance in Cash ledger
 - b. Exports of goods / services
 - c. Supply of goods / services to SEZ/EOU
 - d. Assessment/provisional assessment/ Appeal/ Order No
 - e. ITC accumulated due to inverted duty structure
7. Details of Bank Account (*to be auto populated from RC*)
 - a. Bank Account Number :
 - b. Name of the Bank :
 - c. Bank Account Type :
 - d. Name of account holder :
 - e. Address of Bank Branch :
 - f. IFSC :
 - g. MICR :

8. Whether Self-Declaration by Applicant u/s..... , If applicable Yes/No

Self-Declaration

I/We, M/s. _____ (Applicant) having GSTIN -----, solemnly affirm and certify that in respect of the refund amounting to INR---/ with respect to the tax and interest for the period from---to---, claimed in the refund application, the incidence of such tax and interest has not been passed on to any other person.

(This Declaration is not required to be furnished by applicants, who are claiming refund under sub rule<> of the GST Rules<...>.)

9. Verification

I/We <Taxpayer Name> hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my/our knowledge and belief and nothing has been concealed therefrom.

Place

Signature of Authorized Signatory

Date

(Name)

Designation/ Status

Note: 1) A separate statement has to be filed under sub-rule (4) of rule 1 of draft Goods and Services Tax refund rule.

Annexure-2

Certificate

This is to certify that the refund amounting to INR << >> ----- (in word) claimed by M/s ----- (Applicant's Name) GSTIN----- for the tax period < ---->, the incidence of tax and interest as claimed by the applicant, has not been passed on to any other person. This certificate is based on the examination of the Books of Accounts and other relevant particulars maintained by the applicant.

Signature of the Chartered Accountant/ Cost Accountant:

Name:

Membership Number:

Place:

Date:

This Declaration is not required to be furnished by applicants, who are claiming refund under sub-section<>of section<> of the Act

Note: *The certificate is to be filed by applicants wherever applicable.*