# FORM GST ASMT - 01

*[See rule 98(1)]*

# Application for Provisional Assessment under section60

|  |  |
| --- | --- |
| 1.GSTIN |  |
| 2. Name |  |
| 3. Address |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 4. Details of Commodity / Service for which tax rate / valuation is to be determined | | | | | | | | |
| Sr.  No. | HSN | Name of commodity  /service | Tax rate | | | | Valuatio n | Average monthly turnover of the commodit y / service |
| Centra l tax | State  /  UT  tax | Integrate d tax | Ces s |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| 5. Reason for seeking provisional assessment | | | |  | | | | |
| 6. Documents filed | | | |  | | | | |

7. Verification-

I hereby solemnly affirm and declare that the information given hereinabove is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.

Signature of Authorised Signatory

Name

Designation / Status -------

Date -----

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