FORM GST INS-01 AUTHORISATION FOR INSPECTION OR SEARCH

[See rule 139 (1)]

То			
(Na	ame and Designation of officer)		
	Whereas information has been presented before me and I have reasons to believe		
tha	<u>; </u>		
A.N	M/s		
	has suppressed transactions relating to supply of goods and/or services		
	has suppressed transactions relating to the stock of goods in hand,		
	has claimed input tax credit in excess of his entitlement under the Act		
	has claimed formed in excess of his chartement under the rec		
	has indulged in contravention of the provisions of this Act or rules made thereunder to evade tax under this Act;		
	OR		
B. 1	M/s		
	is engaged in the business of transporting goods that have escaped payment of tax is an owner or operator of a warehouse or a godown or a place where goods that have escaped payment of taxhave been stored has kept accounts or goods in such a manner as is likely to cause evasion of tax payable under this Act.		
	OR		
C.			
	goods liable to confiscation / documents relevant to the proceedings under the Act are secreted in the business/residential premises detailed herein below < <details of="" premises="" the=""></details>		
The	erefore,—		
	in exercise of the powers conferred upon me under sub-section (1) of section 67 of the Act, I authorize and require you to inspect the premises belonging to the above mentioned person with such assistance as may be necessary for inspection of goods or documents and/or any other things relevant to the proceedings under the said Act and rules made thereunder.		

Act, I authorize and require you to search the be necessary, and if any goods or documents of the search that	me under sub-section (2) of section 67 of the e above premises with such assistance as may ments and/or other things relevant to the ze and produce the same forthwith before mende thereunder.		
Any attempt on the part of the person to mislead the questions relevant to inspection / search providing false evidence is punishable with in with section 179, 181, 191 and 418 of the Indian	operations, making of false statement of operations.		
Given under my hand & seal this day of (month) 20 (year). Valid for day(s).			
Seal			
Place	Signature, Name and designation of the issuing authority		
Name, Designation & Signature of the Inspection Officer/s			
(i)			
(ii)			