

**FORM ST - 4**

**Form of Appeal to the Commissioner of Central Excise (Appeals) under section 85 of the Finance Act, 1994 (32 of 1994)**

- 1. No. \_\_\_\_\_ of \_\_\_\_\_ 20\_\_\_\_ : .....
- 2. Name and address of the appellant : .....
- 3. Designation and address of the officer passing the :  
decision or order appealed against and the date of  
decision or order : .....
- 4. Date of communication of the decision or order :  
appealed against to the appellant : .....
- 5. (i) Period of dispute : .....
- (ii) Amount of service tax, if any, demanded for the :  
period mentioned in column (i) : .....
- (iii) Amount of refund, if any, claimed for the period :  
mentioned in column (i) : .....
- (iv) Amount of interest : .....
- (v) Amount of penalty : .....
- (vi) Value of the taxable service for the period :  
mentioned in column (i) : .....
- 6. Whether service tax or penalty or interest or all the :  
three have been deposited? : .....
- 6A Whether the appellant wishes to be heard in person? :  
.....
- 7 Relief claimed in appeal :  
.....

**STATEMENT OF FACTS**

**Grounds of appeal**

Signature of the authorized  
representative, if any

Signature of the appellant

**Verification**

I, \_\_\_\_\_ the appellant, do hereby declare that what is stated above is true to the best of my information and belief.

Verified today, the \_\_\_\_\_ day of \_\_\_\_\_ 20

Place:

Date:

Signature of the authorized  
representative, if any

Signature of the appellant or his  
authorized representative

**Note:** The form of appeal including the statement of facts and the grounds of appeal shall be filed in duplicate and shall be accompanied by a copy of the decision or order appealed against.

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