

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 service tax or penalty or interest or all the :
three have been deposited? :
- 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.
