

ANNEXURE VII

APPLICATION FORM FOR REFUND

Ref. No.

Date:

The Regional Director

Regional Revenue & Customs Office

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Name of the exempt organization or individual:

TPN/ Agency code:

Address:

Contact Number:

Bank Account No.:

Account Holder Name:

Bank Name:

Refund details:

SI No.	Name of agency/ Taxpayer	Agency code/ TPN	Refund Amount Claimed	Revenue Money receipt No. & date	Deposit Slip/Bill No. & date

*******Please use additional sheet using the same format, if required.**

Documents required:

Income Tax refund	Sales Tax / Customs Duty/Green Tax refund	Non-tax revenue refund
<ul style="list-style-type: none"> Original revenue money receipt 	<ul style="list-style-type: none"> Original revenue money receipt/ advance adjustment voucher Original IDEC Declaration Form/Import Bill Invoices/Bills 	<ul style="list-style-type: none"> Original revenue money receipt Deposit Slip

I/We hereby declare that information given in this declaration and attached documents are true and correct to the best of my/our knowledge. In case the declaration is found to be untrue or incorrect, I/We shall be liable for fines, penalties and prosecution including rejection of refund claim as per the provisions of the Customs Act 2017, Income Tax Act of the Kingdom of Bhutan, 2001, Sales Tax, Customs and Excise Act 2000 and amendments thereof.

(Signature of the applicant)

Affix a Legal Stamp