

FORM GST APL - 03*[See rule 109(1)]***Application to the Appellate Authority under sub-section (2) of Section 107**

1. Name and designation of the appellant Name-
Designation-
Jurisdiction-
State/Center-
Name of the State-
2. GSTIN/ Temporary ID /UIN-
3. Order no. Date-
4. Designation and address of the officer passing the order appealed against-
5. Date of communication of the order appealed against-
6. Details of the case under dispute-
- (i) Brief issue of the case under dispute-
- (ii) Description and classification of goods/ services in dispute-
- (iii) Period of dispute-
- (iv) Amount under dispute-

Description	Central tax	State/ UT tax	Integrated tax	Cess
a) Tax/ Cess				
b) Interest				
c) Penalty				
d) Fees				
e) Other charges				

7. Statement of facts-
8. Grounds of appeal-
9. Prayer-

10. Amount of demand in dispute, if any -

Particulars of demand/refund, if any	Particulars		Central tax	State/UT tax	Integrated tax	Cess	Total amount	
	Amount of demand created, if any (A)						< total	< total
		a) Tax/ Cess					>	>
	b) Interest					< total	< total	
						>	>	

		c) Penalty					< total >	< total >	
		d) Fees					< total >		
		e) Other charges					< total >		
	Amount under dispute (B)	a) Tax/Cess							< total >
		b) Interest							< total >
		c) Penalty							< total >
		d) Fees							< total >
		e) Other charges							< total >

Place:

Date:

Signature>

Name of the Applicant Officer:

Designation:

Jurisdiction: