FORM GST APL - 05

[See rule 110(1)]

Appeal to the Appellate Tribunal

- 1. GSTIN/ Temporary ID /UIN -
- 2. Name of the appellant -
- 3. Address of the appellant –
- 4. Order appealed against-

Number- Date-

- 5. Name and Address of the Authority passing the order appealed against -
- 6. Date of communication of the order appealed against -
- 7. Name of the representative -
- 8. 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	Integrated	Cess
		tax	tax	
a) Tax/ Cess				
b) Interest				
c) Penalty				
d) Fees				
e) Other charges				

- (v) Market value of seized goods
- 9. Whether the appellant wishes to be heard in person?
- 10. Statement of facts
- 11. Grounds of appeal
- 12. Prayer
- 13. Details of demand created, disputed and admitted

Particulars	Particu	lars	Central	State/UT	Integrated	Cess	Total a	ımount
of demand			tax	tax	tax			
		a) Tax/					<total< td=""><td></td></total<>	
		Cess					>	
		b)					<	
	Amount	Interest					total	
	demanded/	Interest					>	<total< td=""></total<>
	rejected >,	c)					<	\total
	if any	Penalty					total	
	(A)	Tenarty					>	
		d) Fees					<total< td=""><td></td></total<>	
		a) i ces					>	
		e)					<	

	Other			total	
	charges			>	
	a) Tax/			<	
	Cess			total	
	Cess			>	
	b)			<	
	Interest			total	
Amount	interest			>	
under	c)			<	<
dispute	Penalty			total	total
(B)	1 Charty			>	>
(D)				<	
	d) Fees			total	
				>	
	e)			<	
	Other			total	
	charges			>	
	a) Tax/			<	
	Cess			total	
				>	
	b)			<	
	Interest			total	
				>	
Amount	c)			<	<
admitted	Penalty			total	total
(C)				>	>
				<	
	d) Fees			total	
				>	
	e)			<	
	Other			total	
	charges			>	

14. Details of payment of admitted amount and pre-deposit: (a)Details of amount payable :

Particulars		Central	State/UT	Integrated	Cess	Total a	mount
		tax	tax	tax			
	Tax/ Cess					<total< td=""><td></td></total<>	
	Tax/ CCss					>	
a) Admitted						<	<total< td=""></total<>
amount	Interest					total	>
						>	
	Penalty					<	

				total	
				>	
				<	
	Fees			total	
	_			>	
	Other			<	
	charges			total	
	Charges			>	
b) Pre-deposit					
[20% of					
disputed					
tax/cess but					
not exceeding					
Rs.50 crore					
each in					
respect of				<	
CGST, SGST	Tax/ Cess			total	
or cess or not				>	
exceeding					
Rs.100 crore					
in respect of					
IGST and					
Rs.50 crore in					
respect of					
cess] ¹⁴⁷					

(b) Details of payment of admitted amount and [pre-deposit of 20% of the disputed tax and cess but not exceeding Rs. 50 crore each in respect of CGST, SGST or cess or not exceeding Rs.100 crore in respect of IGST and Rs. 50 crore in respect of cess]¹⁴⁸

Sr.	Description	Tax	Paid through	Debit		Amount of	f tax paid	
No.		payable	Cash/ Credit entry Ledger no.	Integrated tax	Central tax	State/UT tax	CESS	
1	2	3	4	5	6	7	8	9
1.	Integrated tax		Cash Ledger Credit Ledger					
2.	Central tax		Cash Ledger Credit					

		Ledger			
	_ State/UT	Cash Ledger			
3.		Credit			
	tax	Ledger			
		Cash Ledger			
4.	CESS	Credit			
		Ledger			

(c) Interest, penalty, late fee and any other amount payable and paid:

Sr.	Description		Amount payable			Debit	Amount paid			
No.		Integrated	Central	State/UT	CESS	entry	Integrated	Central	State/UT	CESS
		tax	tax	tax	CLSS	no.	tax	tax	tax	CLSS
1	2	3	4	5	6	7	8	9	10	11
1.	Interest									
2.	Penalty									
3.	Late fee									
4.	Others									
4.	(specify)									

15. [Place of supply wise details of the integrated tax paid (admitted amount only) mentioned in the Table in sub-clause (a) of clause 14 (item (a)), if any

Place of	Demand	Tax	Interest	Penalty	Other	Total
Supply						
(Name of						
State/UT)						
1	2	3	4	5	6	7] ¹⁴⁹
	Admitted amount [in the Table in sub-clause (a) of clause 14 (item (a))]					

Verification

Ш	I, <	>,	hereby	solemnly	affirm	and	declare	that	the
	information given hereinabove is true	and	l correct	to the be	st of my	kno	wledge a	and be	elief
	and nothing has been concealed theref	rom.							

Place:	
Date:	
	Signature>

Name of the Applicant: Designation /Status: