

# **DOWNLOADABLE FORMS UNDER KVAT, ACT, 2003**

## **I N D E X**

<b>Sl.No.</b>	<b>Form - No</b>	<b>Subject</b>	<b>Page No.</b>	<b>Periodicity / Remarks</b>
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2	<a href="#"><u>Form VAT – 2</u></a>	Amendment of VAT / CoT Registration details	7	Whenever there is a change
3	<a href="#"><u>Form VAT – 3</u></a>	Additional Places of Business Address details	11	Whenever place of business is added
4	<a href="#"><u>Form VAT – 4</u></a>	Partner details form	12	Whenever there is a change
5	<a href="#"><u>Form VAT – 5</u></a>	Authorized Signatories Form	14	Whenever authorized.
6	<a href="#"><u>Form VAT – 6</u></a>	Form to update registration data	15	Before April 30 <sup>th</sup> of every year.
7	<a href="#"><u>Form VAT – 100</u></a>	Monthly return of turnover	17	ON or before 20 <sup>th</sup> of every month
8	<a href="#"><u>Form VAT – 110</u></a>	Return for causal traders	25	ON or before 20 <sup>th</sup> of every month
9	<a href="#"><u>Form VAT – 115</u></a>	Annual Return	27	Before 30 <sup>th</sup> of May every year
10	<a href="#"><u>Form VAT – 120</u></a>	Tax Returns for composition dealers	33	ON or before 15 <sup>th</sup> of every month
11	<a href="#"><u>Form VAT – 125</u></a>	Monthly Statement of tax deducted by Govt.Dept.	36	ON or before 20 <sup>th</sup> of every month
12	<a href="#"><u>Form VAT – 126</u></a>	Monthly statement of tax deducted at source (for industrial canteens)	37	ON or before 20 <sup>th</sup> of every month
13	<a href="#"><u>Form VAT – 127</u></a>	Monthly statement of tax deducted at source for certain goods	38	ON or before 20 <sup>th</sup> of every month
14	<a href="#"><u>Form VAT – 135</u></a>	Annual statement for COT dealers	39	Before 30 <sup>th</sup> May
15	<a href="#"><u>Form VAT – 140</u></a>	Certificate of payment of tax by Agent	42	Within 25 days after close of month
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25	<a href="#"><u>Form VAT – 240</u></a>	Audited Statement of Account under see 31(4)	52	ON or Before 31 <sup>st</sup> Dec. every year
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**FORM VAT 1**

[See rule 4(i)]

**Application for Registration under the Karnataka Value Added Tax Act, 2003/ Central Sales Tax Act, 1956/Karnataka Tax on Entry of Goods Act, 1979**

<b>TIN</b>	(to be filled in by CTD)
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<b>Part - "A" (TIN Allocation)</b>	<b>Sur Name</b>	<b>Given Name</b>	
1. Name of the Applicant			2" X 2" Latest Photograph
2. Father's/Mother's/ Husband's Name			
3. Date of Birth		Sex (M or F)	
4. Trading Name			
5. Business Status (Tick any one)	Proprietary / Partnership / Private Limited Company / Public Limited Company / Others (Specify)..... (if Partnership concern or Company, fill up VAT FORM 4 attached)		
6. PAN			
7. <b>Business Address :</b>			
Number & Street			
Area or Locality			
Village / Town/City			
District		PIN Code	
If having more than one place of business, fill up Form VAT 3 attached.			
8. <b>Contact Numbers :</b>			
Telephone		Mobile	
Fax			
Email			
9. Specimen Signature			

1.		File Form VAT 5 attached if you authorize some one for signing the returns
2.		
3.		

**Part (B) TIN Allocation**

<b>10.</b>	(a)	<b>Residential Address (Permanent)</b>	
	Number & Street		
	Area or Locality		
	Village / Town /City		
	District		State
	PIN Code		Country



22. If Yes, file Form A under the CST (R and T) Rules, 1957, However mention the commodities which you propose to purchase against declarations under Section 8(1) of the CST Act, 1956 as required in serial number 16 of Form A of the said Rules.

(a) For resale	b(i) For use in the manufacturer or processing of goods for sale	(c) For use in mining	(d) For use in the generation of distribution of electricity or any other form of power	(e) For use in the packing of goods for sale / Resale.
	(b)(ii) For use in the Telecommunications network.			

23. Do you wish to deal in goods taxable under the KTEG Act 1979? Yes / No

24. If yes, indicate the commodity proposed to be dealt:

**Additional Information :**

Bank Details:

25. Name of the Bank & Branch

26. Bank Code

27. Account Number

28. Type of Account

(if you operate more than one Bank Account, give details on separate sheet)

**Affidavit :**

I hereby apply for registration under KVAT/KTEG/CST Acts and declare that the details furnished above are true and correct to the best of my knowledge. I am aware that there are penalties for making false declarations.

29. Name

30. Date :

Signature :

\_\_\_\_\_

Status :

\_\_\_\_\_

Note: Please enclose documentary proof in respect of information provided in serial numbers 6,7,8, 10 and 11.

**Part "C" Official Use Only :**

31. Date of receipt

:

32. VAT or COT?

33. EDR :

34. Local VAT Office (LVO) Code : \_\_\_\_\_ Description \_\_\_\_\_

<b>35.</b>	<b>Security Deposit Type</b>	<b>Amount :</b>
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36. If NSC / Bank Guarantee details of Post Office / Bank Drawn on

37. Expiry Date of the instrument referred at (36) above

<b>38.</b>	<b>Free Format text box for notes:</b>
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<b>39.</b>	Processed by :	Officer CODE:	<input type="text"/>
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40	<b><u>Check Memo</u></b> <b>(To be completed by the Department after enquiry / visit)</b>
	Date of Visit :
1.	Nature of business as ascertained :
2.	Date of commencement of purchases and purchases made till date of visit :
3.	Date of commencement of sales and Sales made till date of visit :
4.	Capital proposed to be invested :
5.	Stock of goods held at the time of visit :
6.	Books of accounts maintained :
7.	Verification of originals in connection With information provided in Sl. Nos.6, 7,8,10,11 of Form VAT 1
8.	Verification of Title of place of business (Own / Leased / Rented / Others)
9.	Other information :

Signature of the person with his relation to business

Date:

Remarks of the Registering Authority:

Signature and name of CTI conducting the enquiry.

Signature and seal of the (LVO / VSO)



## Form VAT 2

### Amendment of VAT/CoT Registration Details

New Registration

Amend Registration

1. TIN	
2. Document Control No.	

#### Part - "A" (VRN Allocation)

3.	Name of the Applicant*	Sur Name		Given Name	
----	------------------------	----------	--	------------	--

4.	Trading Name*	
----	---------------	--

Business Address :

5	Number & Street			
6	Area or Locality			
7	Village / Town/City			
8	District	9. PIN Code		

Contact Numbers :

10	Telephone *	
11	Mobile *	
12	Fax *	
13	Email *	
14	Business Status	
15	Father's/Husband's Name	
16	PAN	
17	Date of Birth (dd/mm/yyyy)	

18	Sex (M or F)	
19	Specimen Signature *:	1. .... 2. .... 3. ....
20	2" X 2" Latest Photograph	

**Part - "B (VRN Allocation)**

Residential Address :

21	Number & Street	
22	Area or Locality	
23	Village / Town/City	
24	District	
25	State	
26	PIN Code	
27	Country	

28	Name of the Statutory Authority *	
29	Number	

Business Details

30	Type of Business*	
31	1 <sup>st</sup> Major Commodity Traded/Manufactured	
32	Code :CTD to complete	
33	2 <sup>nd</sup> Major Commodity Traded/Manufactured	
34	Code :CTD to complete	
35	Date of commencement of business* (dd/mm/yyyy)	
36	Tick one of :	

	Turnover for the last Financial Year	Taxable Turnover for a year	Taxable Turnover for the month
	<input type="text"/>	<input type="text"/>	<input type="text"/>

37	Turnover Amount	
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38	Do you wish to apply for/continue registration under CST act ?	Yes	No
		<input type="text"/>	<input type="text"/>

39	Do you wish to register for VAT or Composition TAX ? *	VAT :	CoT :
		<input type="text"/>	<input type="text"/>

Additional Information :

Tick each box where relevant else leave blank

40.	Do you use computerised accounts ?	<input type="text"/>
41.	Are you a regular Importer ?	<input type="text"/>
42.	Are you a regular Exporter * ?	<input type="text"/>
43.	Will you make exempt sales ? *	<input type="text"/>

Bank Details

44	Bank & Branch	
45	Bank Code	
46	Account Number	

Note :

If additional places of business, godowns etc. Complete **Form 5a** for details

If a Partnership : Complete **Form 5b** for Partner Details

If others can sign on your behalf Complete **Form 5c** for authorized signatory



**FORM 3**

[\[See Rule 5\]](#)

**ADDITIONAL PLACES OF BUSINESS ADDRESS DETAILS**

Provisional

Document Control No.

TIN

Name of the Applicant

Sur –name

Given Name

Name :	
Number & Street	
Area or Locality	
Village/Town/City	
District	
PIN Code	
Tel No:	

Name :	
Number & Street	
Area or Locality	
Village/Town/City	
District	
PIN Code	
Tel No:	

Signature: .....

Status: .....

Date: .....

**FOR OFFICIAL USE ONLY**

Date Received:

LVO Code

Authorising Officer Code:

LVO Description returned by the system

Description returned by the system



**FORM 4**

[\[See Rule 7\]](#)

**PARTNER DETAILS FORM**

Provisional

Document Control No.

TIN

NOT USED

Name of the Applicant

Sur –name

Given Name

Partner's Name :	
Father's Name :	
Contact Address:	
Tel No:	
Date of Birth	
Date of entry to Partnership:	
Date of leaving Partnership	
Signature	Photo

Partner's Name :	
Father's Name :	
Contact Address:	
Tel No:	
Date of Birth	
Date of entry to Partnership:	
Date of leaving Partnership	
Signature	Photo

Signature: .....

Status: .....

Date: .....

**FOR OFFICIAL USE ONLY**

Date Received:		LVO Code	
Authorising Officer Code:		LVO Description returned by the system	
Description returned by the system			



**FORM VAT 5**

[\[See rule 1711\]](#)

**Authorised Signatories Form**

TIN	
Name of the Applicant	

Name of Authorised Signatory-1		Signature	
Name of Authorised Signatory-2		Signature	
Name of Authorised Signatory-3		Signature	
Name of Authorised Signatory-4		Signature	

I certify that the above named persons are authorised to sign VAT returns on behalf of the dealer stated above.

Name:

Dated: .....

Signature:

**FOR OFFICIAL USE ONLY**

Date Received	
LVO Code	
Authorising Officer Code	



**FORM VAT 6**

[See Rule 38(8)]

**Form to update registration data**

(to be filled in and attached to the return for the last month of every year)

LVO/VSO:

1. Dealer's TIN	
2. Trading Name i.e. Name & style of Business (or Trader's name in the case of proprietary concern).	
3. Business Address:	
a) Number & Street	
b) Area & Locality	
c) Village / Town / City	
d) Pin Code	
4. Telephone Number	
5. Email Address	
6. i ) In VAT Form -1 registration application filed, whether opted for VAT Scheme OR CoT Scheme	VAT / COT
ii ) Whether subsequently changed the option from VAT Scheme to CoT Scheme or from CoT Scheme to VAT Scheme ?	YES/NO
iii ) If Yes, Date of filing of application for change of scheme.	DD MM YY
iv ) Whether the returns are being filed under VAT Scheme OR under the CoT Scheme ?	VAT / COT
7. Total Turnover during the year ( i.e. consolidation of 12 months turnover as per Box8 of Form VAT 100 OR of 4 quarters/12 months turnover as per Form VAT 120	
8. Income Tax PAN	
9. KST Registration Number ( in case of dealers who were registered as KST Dealers before 01/04/2005).	
10. CST Registration number (In case of Dealers who were also registered under the Central Sales Tax Act before 01/04/2005).	
11. Whether the dealer is registered under the Central Sales Tax Act, In addition to being a VAT dealer ?	YES / NO
12. (a) Whether registered under the Entry Tax Act ?	YES / NO
(b) Whether an importer of notified goods under the Special Entry Tax Act ?	YES / NO
Date :	Dealer's Signature with stamp:

Place :	Signatory Name :
	Designation :

**Instructions to fill in the form.**

Note : To be filled in CAPITAL LETTERS only.

**Sl.No.1: TIN :** The correct TIN that is currently being used by the dealer in his Returns /correspondence, as certified by the concerned LVO is to be entered herein.

**Sl.No.2: Trading Name :** The Name and style of Business in the case of Partnership firm /Company /Society etc & Name of the proprietor in the case of individual status dealers is to be entered.

**Sl.No.3: Business Address:** Correct and present address of the dealer's business premises is required to be entered in the given field.

**Sl.No.5: VAT or Scheme:** The dealer has to confirm from his records and then tick in the box provided , whether he is under the CoT Scheme or under the VAT Scheme.

**Sl.No.6: Total Turn over :** Consolidated turnover of all 12 monthly returns as in Box No.8 of VAT 100 or of 4 quarters / 12 months Turnover as in 120 filed with the CTD is to be filled in the box.

**Sl.No.8: KST RC:** Refers to KST RC NO. (8 digit code )which was in use by a KST / CST dealer just before introduction of VAT (01/04/2005).

**Sl.No.9: CST RC:** Refers to CST RC NO. (8 digit code )which was in use by a KST dealer just before introduction of VAT (01/04/2005).

**Sl.No.10: Present position of CST Registration :** This column is to be ticked only if the dealer is presently a CST dealer in addition to being a VAT dealer.

**Sl.No.4,7 &11:** Self explanatory.



Government of Karnataka  
(Department of Commercial Taxes)

**FORM VAT 100**

(See Rule 38)

**1**

**General Information:**

1.1	LVO CODE :	
1.2	Tax Period (Month/Quarter) :	
1.3	Type of return :	Original / Corrected / Revised / Final
1.4	Date of filing return :	
1.5	TIN No. :	
1.6	Full Name of the dealer :	
1.7	Address of the dealer :	
1.8	Tax invoices issued in the month*:	From: To:

**PARTICULARS OF TURNOVERS**

Local			Interstate		
<b>2)</b>	Total Turnover (local)		<b>3</b>	Total Turnover (Interstate/Exports Import / Consignment)	
2.1	Sales return, discounts, labour charges etc. as per Rule 3(2)		3.1	Sales return, discounts, labour charges etc. as per Rule 3(2)	
2.2	Consignment Sales / C.A. Sales		3.2	Stock Transfers / Consignment Sales	
2.3	Tax Collected (VAT)		3.3	Exempted Sales	
2.4	Exempted Sales		3.4	Direct Exports	
2.5	Others		3.5	Deemed Exports (Against H Form)	
2.6	Taxable Turnover (local) (Box 2 less (Box 2.1 to Box 2.5))		3.6)	Sales in Transit (E-1 and E-II)	
			3.7	Sales in the course of import (High Sea Sales)	
			3.8	CST Collected	
			3.9	Taxable (Interstate) (Box No.3 less (Total of Box No.3.1 to 3.8))	

<b>4.</b>	<b>Net Tax Payable</b>	
4.1	Output Tax Payable	(Refer Box no.8.3)
4.2	B/f of Previous month	
4.3	Input tax credit	(Refer Box No.11)
4.4	Tax Payable	[Box No.4.1 – (Box No.4.2 + Box No 4.3)]
4.5	Tax deducted at source	(Certificate Enclosed)
4.6	Balance Tax Payable	(Box No. 4.4 – Box No. 4.5)



6.4	Taxable turnover of URD purchases (specify rate of tax)		6.10	Purchase tax Payable (relating to Box No.6.4)	
6.5	Others, if any (please specify)		6.11	Output tax Payable (relating to Box No.6.5)	
6.6	<b>Total (Box No.6.1 to 6.6)</b>		6.12	<b>Total Output Tax Payable (Box No 6.7 to 6.11)</b>	

<b>7.</b>	<b>Details of Interstate Sales and CST Payable</b>				
7.1	Taxable turnover of inter-State sales at 1%		7.7	Output tax Payable (relating to Box No.7.1)	
7.2	Taxable turnover of inter-State sales against C or D Forms at 4% tax		7.8	Output tax Payable (relating to Box No.7.2)	
7.3	Taxable turnover of inter-State sales without C or D Forms at 12.5%.		7.9	Output tax Payable (relating to Box No.7.3)	
7.4	Taxable turnover of inter-State sales without C or D Forms at 10%.		7.10	Output tax Payable (relating to Box No.7.4)	
7.5	Others, if any (please specify)		7.11	Output tax Payable (relating to Box No.7.5)	
7.6	<b>Total (Total of Box Number 7.1 to 7.5)</b>		7.12	<b>Total output tax Payable (Total of Box Nos.7.7 to 7.11)</b>	

<b>8.</b>	<b>Less:</b>	
	<b>8.1) Total Out Put Tax (Total of Box No. 6.14 and Box No. 7.12)</b>	
	<b>8.2) Output Tax deferred to Industries as per Incentive Notifications</b>	
	<b>8.3) Net Output Tax Payable (Box No. 8.1 Less Box No. 8.2)</b>	

<b>9.</b>	<b>Details of Purchases and Input Tax</b>				
9.1	Net value of purchases at 1% tax		9.11	Input tax (relating to Box No.9.1)	
9.2	Net value of purchases at 4 % tax		9.12	Input tax (relating to Box No.9.2)	
9.3	Net value of purchases at standard rate of tax at 12.5 % tax		9.13	Input tax (relating to Box No.9.3)	
9.4	Value of URD purchases to the extent used or sold (specify rate of tax)		9.14	Input tax (relating to Box No.9.4)	
9.5	Others, if any (please specify)		9.15	Input Tax (relating to Box No.9.5)	
9.6	Value of VAT exempted goods.				

9.7	Purchases from Composition dealer				
9.8	Value of goods imported and / or purchased in the course of inter-State trade including E1 and EII purchase.				
9.9	Value of goods received by stock transfer / consignment transfer				
9.10	Total value of purchases (Total of Box Nos. 9.1 to 9.9)		9.16	Input tax (relating to Box No.9.11 to 9.5)	

<b>10</b>	<b>Ineligible Input Tax Credit</b>				
10.1.	Non-deductible input tax being restricted u/s 11 of VAT Act				
10.2.	Non-deductible input tax – Pre-registration Purchases u/s 13 of VAT Act				
10.3.	Non-deductible input tax-under special rebating scheme u/s 14 read with Section 11 of VAT Act				
10.4.	Non-deductible input tax – under partial rebating scheme u/s 17 of VAT Act				
10.5.	Others, Please Specify				
10.6.	<b>Total Ineligible Input Tax Credit</b> (Total of Box No. 10.1 to Box No. 10.5)				
<b>11.</b>	<b>Eligible Input Tax Credit (Box No. 9.16 – Box No. 10.6)</b>				

### DECLARATION

I / We Declare that the particulars furnished above are true and complete in all respects.  
I / We hereby declare that I am / We are aware that there are penalties for making false declarations  
or incomplete returns.

Place :

Signature :

Date :

Name and designation / Seal:

<b>12.</b>	<b>ENTRY TAX</b>	
	(Applicable to dealers' who are liable to tax under the KTEG ACT, 1979)	

12.1	<b>TOTAL PURCHASES :</b> Value of goods liable for entry tax both Local, Interstate and Imports including freight and inward expenses	
	<b>LESS:</b>	
12.2	Purchases within the local Area, Purchases against Form-40	

	Purchase Returns, Re-exports	
12.10	<p>Tax paid particulars:- Rs. _____ Cash / DD / Challan No: _____</p> <p>Date: _____ Bank: _____</p> <p>I / We declare that the particulars furnished above are true and complete in all respects.</p> <p>Place : _____ Signature : _____</p> <p>Date : _____ Name and designation / Seal : _____</p> <p>Incomplete forms will be deemed to be invalid and penalties relating to non-filing will apply. Note: If the Return is not applicable then it can be written as ``N.A''</p>	
12.3	Others	
12.4	<b>TAXABLE TURNOVER</b>	

### CALCULATION OF ENTRY TAX PAYABLE

	Description of Goods	Taxable Value	Tax Payable
12.5	Goods Taxable @ 1%		
12.6	Goods Taxable @ 2%		
12.7	Goods Taxable @ 5%		
12.8	Goods Taxable (others)		
12.9	<b>TOTAL</b>		

### 3. SPECIAL ENTRY TAX

(Applicable to dealers who are liable to tax under the Karnataka Special Tax on Entry of certain Goods Act, 2004)

	TOTAL PURCHASES :	
13.1	Value of goods liable for KSTECG both Local, Interstate and Imports including freight and inward expenses	
	<b>LESS:</b>	

13.2	a) Exemption (Please specify) b) Purchase Returns c) Re-exports d) Others	
13.3	<b>TAXABLE TURNOVER</b>	

	Description of the Notified Goods	Taxable Value	Tax Payable
13.4	Goods Taxable @4%		
13.5	Goods Taxable @ 12.5%		
13.6	Goods Taxable (others)		
13.7	<b>TOTAL</b>		
13.8	Less: CST Paid as per Section 4(2) of KSTECG Act		
13.9	Balance Tax Payable		

13.10	Tax Paid particulars : Rs. <span style="float: right;">Cash / DD / Challan No:</span>	
	Date :	Bank:
	I / We declare that the particulars furnished above are true and complete in all respects.	
	Place :	Signature :
	Date :	Name & Designation / Seal :
	Incomplete forms will be deemed to be invalid and penalties relating to non-filing will apply.	
	Note : If the Return is not applicable then it can be written as "N.A."	

### ANNEXURE 1

**Input-Turnover, (Local) and Tax Paid as per Tax Invoices (Refer Box No. 9 and Purchase Register)**

**For the month / Quarter**

**1.** This information shall be furnished by a VAT dealer whose turnover for the preceding year is less than 2 crores and / or less than 16 lakhs during the month.

**2.** This information shall be furnished dealer wise (TIN wise) as below or extract of Purchase register (Refer Rule 33(2) of KVAT Rules, 2005)

Sl. No	Name of the Seller	TIN of the Seller	Invoice	Date of	Net Value of the goods	Tax Charged
		(Input Supplier)	Number	Purchase	(Input Turnover)	

I/We declare that the particulars furnished above are true and complete in all respects.

Place :

Signature :

Date :

Name & Designation / Seal :

### ANNEXURE- II

Details of statutory forms filed for the quarter ending 30th June, 30th September, 31st December and 31st March \*

**(A) EXTRACT****For Quarter**

<b>Nature of statutory Form filed</b>	<b>Turnover for which statutory Forms to be filed for the quarter</b>	<b>Turnover mentioned in the statutory forms filed for the quarter ending</b>	<b>Balance Turnover for which statutory forms are to be filed</b>	<b>Number of statutory forms filed</b>
<b>CST:</b>				
1) C-Form				
2) D-Form				
3) F-Form				
4) H-Form				
5) I - Form				
6) E I -Forms				
7) E II - Forms				
8) C-Forms related to E1/E2 Forms				

I / We declare that the particulars furnished above are true and complete in all respects.

Place:

Signature :

Date :

Name & designation / Seal :

**(B) DETAILS (Statutory Forms filed along with this annexure) For Quarter:**



<b>General Information:</b>				
LVO/VSO CODE: _____		Tax Period (Quarter): From _____ To _____		
TIN NUMBER: _____		Type of return: Original/Corrected/Revised/Final		
Name and Address of the dealer:		Date of filing return: _____		
<b>1</b>	Taxable Turnover of sales at 4% tax		<b>12</b>	Output tax collected (relating to Box No.1)
<b>2</b>	Taxable Turnover of sales at Standard rate of tax		<b>13</b>	Output tax collected (relating to Box No.2)
<b>3</b>	Taxable Turnover of sales at other rates of tax		<b>14</b>	Output tax collected (relating to Box No.3)
<b>4</b>	Taxable Turnover of Interstate Sales (File C form or other Forms in support of Concession rate of tax claimed, if any)		<b>15</b>	Output tax collected (relating to Box No.4)
<b>5</b>	Total (Total of Box No. 1 to Box No. 4)		<b>16</b>	Total output tax collected (Total of Box No.12 to Box No.15)
<b>6</b>	Value of Purchases from unregistered dealers		<b>17</b>	Tax on Purchases under section 3(2) of VAT Act (relating to Box No.6)
<b>7</b>	Net Value of Purchases at 4% tax (Excepting Schedule 5 items)		<b>18</b>	Input tax (relating to Box No.7)
<b>8</b>	Net Value of Purchases at standard rate of tax (Excepting Schedule 5 items)		<b>19</b>	Input tax (relating to Box No.8)
<b>9</b>	Net Value of Purchases at other rates of tax (Excepting Schedule 5 items)		<b>20</b>	Input tax (relating to Box No.9)
<b>10</b>	Value of other purchases			
<b>11</b>	Total value of Purchases (Total of Box No 7 to Box No 10)		<b>21</b>	Total input tax (Total of Box No.18 to Box No.20)
			<b>22</b>	Deductible input tax paid u/s. 3(2)
			<b>23</b>	Total Tax Payable or Refundable [(Total of Box No.16 and Box No.17) Less (Total of Box No.21 and Box No.22)]
			<b>24</b>	Deposit Paid
			<b>25</b>	Net Amount Payable (Box No. 23 Less Box No 24)

<b>26</b>	Details of payment made:
	Cheque/DD Number.....Dated.....for Rs.

I/We also enclose herewith C forms/D forms in support of Concession rate of tax relating to Box No. 4(strike out if not applicable)

I, Sri/Smt.....declare that the above statement is true and correct to the best of my knowledge and belief.

Dated:

Signature:

Status :

**FOR CTD/BANKS USE ONLY**

Date of receipt of return \_\_\_\_\_

Recd. Rs. \_\_\_\_\_

In Words \_\_\_\_\_

Challan No. \_\_\_\_\_ Date \_\_\_\_\_

Signature and Seal of LVO/VSO

<b>27. ENTRY TAX</b>																			
(Applicable to dealers' who are liable to tax under the KTEG ACT, 1979)																			
27.1	TOTAL PURCHASES : Value of goods liable for entry tax both Local, Interstate and Imports including freight and inward expenses : _____																		
	LESS:																		
27.2	Purchases within the local Area, Purchases against Form-40 Purchase Returns, Re-exports : _____																		
27.3	Others : _____																		
27.4	TAXABLE TURNOVER : _____																		
<b>CALCULATION OF ENTRY TAX PAYABLE</b>																			
	<table border="1" style="width: 100%;"> <thead> <tr> <th>Description of Goods</th> <th>Taxable Value</th> <th>Tax Payable</th> </tr> </thead> <tbody> <tr> <td>27.5 Goods Taxable @ 1%</td> <td></td> <td></td> </tr> <tr> <td>27.6 Goods Taxable @ 2%</td> <td></td> <td></td> </tr> <tr> <td>27.7 Goods Taxable @ 5%</td> <td></td> <td></td> </tr> <tr> <td>27.8 Goods Taxable (others)</td> <td></td> <td></td> </tr> <tr> <td>27.9 TOTAL</td> <td></td> <td></td> </tr> </tbody> </table>	Description of Goods	Taxable Value	Tax Payable	27.5 Goods Taxable @ 1%			27.6 Goods Taxable @ 2%			27.7 Goods Taxable @ 5%			27.8 Goods Taxable (others)			27.9 TOTAL		
Description of Goods	Taxable Value	Tax Payable																	
27.5 Goods Taxable @ 1%																			
27.6 Goods Taxable @ 2%																			
27.7 Goods Taxable @ 5%																			
27.8 Goods Taxable (others)																			
27.9 TOTAL																			
27.10	Tax paid particulars:- Rs. _____ Cash/DD/Challan No: _____ Date: _____																		
27.11	Bank: _____																		
27.12	I/We declare that the particulars furnished above are true and complete in all respects. Place : _____ Signature : _____ Date : _____ Name and designation/Seal : _____ Incomplete forms will be deemed to be invalid and penalties relating to non-filing will apply. Note: If the Return is not applicable then it can be written as ``N.A''																		



**FORM VAT 115**

(See Rule 34(4))

# ANNUAL STATEMENT

<b>1</b>	<b>General Information:</b>	
	1.1) LVO/VSO CODE : _____	1.2) Year : _____
		1.3) Type of statement : Original/ Revised
		1.4) Date of filing of statement: _____
	1.5) TIN No. : _____	
	1.6) Full Name of the dealer : _____	
	1.7) Address of the dealer : _____	

## PARTICULARS OF TURNOVERS

2) Total Turnover (local)		3) Total Turnover (Interstate/Exports/Import/Consignment)	
2.1) Sales return, discounts, labour charges etc. as per Rule 3(2)		3.1) Sales return, discounts, labour charges etc. as per Rule 3(2)	
2.2) Consignment Sales/CA Sales		3.2) Stock Transfers / Consignment Sales	
2.3) Tax Collected (VAT)		3.3) Exempted Sales	
2.4) Exempted Sales		3.4) Direct Exports	
2.5) Others		3.5) Deemed Exports (Against H Form)	
2.6) Taxable Turnover (local) (Box 2 less (Total of Box 2.1 to Box 2.5))		3.6) Sales in Transit (E-I and E-II)	
		3.7) Sales in the course of import (High Sea Sales)	
		3.8) CST Collected	
		3.9) Taxable (Interstate) (Box no.3 less (Total of Box no.3.1 to 3.8))	
<b>4. Net Tax Payable</b>			
	4.1) Output Tax Payable (Refer Box no.8.3)		
	4.2) Input tax credit (Refer Box No.11)		
	4.3) Net Tax Payable (Box No.4.1 - Box No 4.2]		
	4.4) Tax deducted at source (Certificate Enclosed)		
	4.5) Balance Tax Payable (Box No. 4.3 – Box No. 4.4)		
4.6) Refund Yes / No	Rs.	4.7) Credit carried forward Yes / No	Rs.
4.8) Net Tax refund as per Incentive Notification		Rs.	

<b>5.</b>	<b>Tax payment details</b>			
	Details	Amount	Cash/DD/Chq/Challan No:	Bank
	5.1) Tax Payable as per Box No.4.5			
	5.2) Interest			
	5.3) Others			
	5.4) Total of Box No.5.1, Box No.5.2 and Box No.5.3			

### FOR CTD/BANKS USE ONLY

	Date of receipt of return _____
	Recd. Rs. _____
	In Words _____
	Challan No. _____ Date _____
Signature and Seal of LVO/VSO	

<b>6.</b>	Details of Local Sales/ URD Purchases and Output Tax/Purchase Tax Payable*
-----------	----------------------------------------------------------------------------

6.1	Taxable turnover of sales at rate of 1% tax		6.7	Output tax Payable (relating to Box No.6.1)	
6.2	Taxable turnover of sales at rate of 4% tax		6.8	Output tax Payable (relating to Box No.6.2)	
6.3	Taxable turnover of sales at standard rate of tax of 12.5%		6.9	Output tax Payable (relating to Box No.6.3)	
6.4	Taxable turnover of URD purchases (specify rate of tax)		6.10	Purchase tax Payable (relating to Box No.6.4)	
6.5	Others, if any (please specify)		6.11	Output tax Payable (relating to Box No.6.5)	
6.6	<b>Total (Box No.6.1 to 6.5)</b>		6.12	<b>Total Output Tax Payable (Box No 6.7 to 6.11)</b>	

7. Details of Interstate Sales and CST Payable\*

7.1	Taxable turnover of inter-State sales at 1%		7.7	Output tax Payable (relating to Box No.7.1)	
7.2	Taxable turnover of inter-State sales against C or D Forms at 4% tax		7.8	Output tax Payable (relating to Box No.7.2)	
7.3	Taxable turnover of inter-State sales without C or D Forms at 12.5%.		7.9	Output tax Payable (relating to Box No.7.3)	
7.4	Taxable turnover of inter-State sales without C or D Forms at 10%.		7.10	Output tax Payable (relating to Box No.7.4)	
7.5	Others, if any (please specify)		7.11	Output tax Payable (relating to Box No.7.5)	
7.6	<b>Total (Total of Box Number 7.1 to 7.5)</b>		7.12	<b>Total output tax Payable (Total of Box Nos.7.7 to 7.11)</b>	

8.

<b>8.1) Total Out Put Tax (Total of Box No. 6.12 and Box No. 7.12)</b>					
<b>Less: 8.2) Output Tax deferred to Industries as per Incentive Notifications</b>					
<b>8.3) Net Output Tax Payable (Box No. 8.1 Less Box No. 8.2)</b>					

\* NOTE: The output turnover pertaining to Box No.6 and Box No.7 shall be furnished commodity wise.

9.	Details of Purchases and Input Tax			
	9.1 Net value of purchases at 1%		9.11 Input tax (relating to	

	tax		Box No.9.1)	
	9.2 Net value of purchases at 4 % tax		9.12 Input tax (relating to Box No.9.2)	
	9.3 Net value of purchases at standard rate of tax at 12.5 %		9.13 Input tax (relating to Box No.9.3)	
	9.4 Value of URD purchases to the extent used or sold (specify rate of tax)		9.14 Input Tax (relating to Box No.9.4)	
	9.5 Others, if any (please specify)		9.15 Input tax (relating to Box No.9.5)	
	9.6 Value of VAT exempted goods.			
	9.7 Purchases from Composition dealer			
	9.8 Value of goods imported and / or purchased in the course of inter-State trade including EI and EII purchase.			
	9.9 Value of goods received by stock transfer / consignment transfer			
	9.10 Total value of purchases (Total of Box Nos. 9.1 to 9.9)		9.16 Total input tax (Total of Box Nos. 9.11 to 9.15)	
<b>10)</b>	<b>Ineligible Input Tax Credit</b>			
	10.1. Non-deductible input tax being restricted u/s 11 of VAT Act			
	10.2. Non-deductible input tax – Pre-registration Purchases u/s 13 of VAT Act			
	10.3. Non-deductible input tax-under special rebating scheme u/s 14 read with Section 11 of VAT Act			
	10.4. Non-deductible input tax – under partial rebating scheme u/s 17 of VAT Act			
	10.5. Others, Please Specify			
	<b>10.6. total Ineligible Input Tax Credit (Total of Box No. 10.1 to Box No. 10.5)</b>			
<b>11.</b>	<b>Eligible Input Tax Credit (Box No. 9.16 – Box No. 10.6)</b>			
	<b>DECLARATION</b>			
	I / We Declare that the particulars furnished above are true and complete in all respects. I / We hereby declare that I am / We are aware that there are penalties for making false declarations or incomplete returns.			
	Place :	Signature :		
	Date :	Name and designation/Seal:		

<b>12.</b>	<b>ENTRY TAX - ANNUAL STATEMENT</b>
	(Applicable to dealers' who are liable to tax under the Karnataka Tax on Entry of Goods Act, 1979)

12.1	TOTAL PURCHASES : Value of goods liable for entry tax both Local, Interstate and Imports including freight and inward expenses : _____		
	LESS:		
12.2	Purchases within the local Area, Purchases against Form-40 Purchase Returns, Re-exports : _____		
12.3	Others : _____		
12.4	TAXABLE TURNOVER : _____		
<b>CALCULATION OF ENTRY TAX PAYABLE</b>			
	Description of Goods	Taxable Value	Tax Payable
12.5	Goods Taxable @ 1%		
12.6	Goods Taxable @ 2%		
12.7	Goods Taxable @ 5%		
12.8	Goods Taxable (others)		
12.9	TOTAL		
12.10	Tax paid particulars:- Rs. _____ Cash/DD/Challan No: _____ Date: _____ Bank _____		
	I/We declare that the particulars furnished above are true and complete in all respects. Place : _____ Signature : _____ Date : _____ Name and designation/Seal : _____ Incomplete forms will be deemed to be invalid and penalties relating to non-filing will apply. Note: If the Return is not applicable then it can be written as "N.A."		
<b>SPECIAL ENTRY TAX - ANNUAL STATEMENT</b>			
13	(Applicable to dealers who are liable to tax under the Karnataka Special Tax on Entry of certain Goods Act, 2004)		
	TOTAL PURCHASES : Value of goods liable for KSTECG both Interstate and Imports including freight and inward expenses : _____		
	LESS:		
13.1	a) Exemption (Please specify) : _____		
13.2	b) Purchase Returns : _____		
	c) Re-exports : _____		
13.3	d) Others : _____		
	TAXABLE TURNOVER : _____		
	Description of the Notified Goods	Taxable Value	Tax Payable
13.4	Goods Taxable @4%		
13.5	Goods Taxable @ 12.5%		
13.6	Goods Taxable (others)		
13.7	TOTAL		
13.8	Less: CST Paid as per Section 4(2) of KSTECG Act		
13.9	Balance Tax Payable		
13.10	Tax Paid particulars : Rs. _____ Cash / DD / Challan No: _____ Date : _____ Bank: _____ I/We declare that the particulars furnished above are true and complete in all respects. Place : _____ Signature : _____ Date : _____ Name & Designation / Seal : _____ Incomplete forms will be deemed to be invalid and penalties relating to non-filing will apply. Note : If the Return is not applicable then it can be written as "N.A."		

Commodity wise bifurcation of turnover

<b>14) Local Turnover</b>							
Sl. No.	Particulars	Description of Commodity	Turnover	Sl. No.	Particulars	Description of Commodity	Turnover
14.1	Taxable turnover of sales at rate of 4% tax (refer Box No.6.2)			14.3	Taxable turnover of sales at rate of 1% tax and Other (refer Box No.61. and 6.5)		
	(i) 1 <sup>st</sup> Major Commodity				(i) 1 <sup>st</sup> Major Commodity		
	(ii) 2 <sup>nd</sup> Major Commodity				(ii) 2 <sup>nd</sup> Major Commodity		
	(iii) Others				(iii) Others		
14.2	Taxable turnover of sales at standard rate of tax of 12.5% (refer Box No.6.3)			14.4	Exempted Sales, Consignment/Commission Agent Sales (refer box No.2.4)		
	(i) 1 <sup>st</sup> Major Commodity				(i) 1 <sup>st</sup> Major Commodity		
	(ii) 2 <sup>nd</sup> Major Commodity				(ii) 2 <sup>nd</sup> Major Commodity		
	(iii) Others				(iii) Others		
<b>15) Interstate Sales/Export Sales/Consignment Sales/Stock Transfer</b>							
Sl. No.	Particulars	Description of Commodity	Turnover	Sl. No.	Particulars	Description of Commodity	Turnover
15.1	Taxable turnover of Interstate sales against C or D Forms at 4% tax (refer Box No.7.2)			15.5	Exempted Sales (refer Box No.3.3.		
	(i) 1 <sup>st</sup> Major Commodity				(i) 1 <sup>st</sup> Major Commodity		
	(ii) 2 <sup>nd</sup> Major Commodity				(ii) 2 <sup>nd</sup> Major Commodity		
	(iii) Others				(iii) Others		
15.2	Taxable turnover of Interstate sales without C or D Forms at 12.5% .(refer Box No.7.3)			15.6	Direct Exports/ Deemed Exports (refer Box No.3.4. and 3.5)		
	(i) 1 <sup>st</sup> Major Commodity				(i) 1 <sup>st</sup> Major Commodity		
	(ii) 2 <sup>nd</sup> Major Commodity				(ii) 2 <sup>nd</sup> Major Commodity		
	(iii) Others				(iii) Others		
15.3	Taxable turnover of Interstate sales without C or D Forms at 10%.(refer Box No.7.4)			15.7	Sales in Transit (E-I and E-II)(refer Box No.3.6)		
	(i) 1 <sup>st</sup> Major Commodity				(i) 1 <sup>st</sup> Major Commodity		
	(ii) 2 <sup>nd</sup> Major Commodity				(ii) 2 <sup>nd</sup> Major Commodity		
	(iii) Others				(iii) Others		
15.4	Stock Transfers/Consignment Sales (refer Box No.3.2)			15.8	Sales in the course of import (High Sea Sales)(refer Box No.3.7)		
	(i) 1 <sup>st</sup> Major Commodity				(i) 1 <sup>st</sup> Major Commodity		
	(ii) 2 <sup>nd</sup> Major Commodity				(ii) 2 <sup>nd</sup> Major Commodity		
	(iii) Others				(iii) Others		



**FORM VAT 120**  
 [See Rule 138(4) , 139(4) & 140(4)]  
**COMPOSITION TAX RETURN UNDER THE VAT ACT, 2003**  
 (Please fill-up Box No 2/3/4 whichever is applicable)

<b>1) General Information</b>					
1.1) Name :		1.3.) TIN	:		
1.2) Address:		1.4) Year	:	Orginal/Revised/Final	
		1.5) Type of Return	:		
		1.6) L.V.O / V.S.O	:		
2) For Trader. Manufacturer, Processor, Hoteliers, Restaurateurs, Caterers, Sweetmeat Stall, Ice Cream parlours and Bakery					
Particulars					Amount in (Rs)
2.1) Total Turnover/Total consideration in the period					
2.2) URD Purchase liable to tax u/s 3(2)					
2.3) Balance Turnover liable for Composition Tax (Box no.2.1 – Box No.2.2)					
<b>3) For a dealer having mechanized stone crushing unit</b>					
	Size of Crushing Machine	Number of Crushing Machine	Tax Per machinery (in case of Granite Metal Crushing unit)	Tax Per machinery (in case of non-granite Metal Crushing unit)	Total Tax Liability (Rs)
3.1)	39' X 9'		Rs. 16,500.00	Rs. 10,000.00	
3.2)	16' X 9'		Rs. 8,250.00	Rs. 5,000.00	
3.3)	12' X 9'		Rs. 4,000.00	Rs. 3,000.00	
3.4)	<b>Total Tax Due</b>				
3.5)	<b>Tax Paid</b>				
3.6) Tax Paid Particulars: Ch./DD/Challan No. _____ Date: _____ Bank: _____					
I/We hereby declare that the particulars furnished above are true and complete in all respects.					
Signature: _____ Name: _____ Status: _____ Date: _____					

<b>4) For Works Contractors who purchases/obtains goods locally as well as from outside the State/Country</b>	
Particulars	Amount (Rs)
4.1) Total consideration pertaining to works contract including the turnover of traded goods	
Less: 4.2) Sub contractor's turnover	
4.3) Value of Goods Purchased /obtained from outside the state/country and transferred in the execution of works contract.	
4.4) Turnover of Traded goods	
4.5) Balance turnover of works contract	

SL.No.	Classification	Rate	Amount(Rs)	TAX (Rs)
4.6)	Turnover liable for works contract (refer Box No.4.5)	4%		
4.7)	Turnover of Traded goods (refer Box No.4.4)	4%		
4.8)	Turnover of Traded goods (refer Box No.4.4)	12.5%		
4.9)	Value of goods purchased/obtained outside the State/Country (refer Box No.4.3)	4%		
4.10)	Value of goods purchased/obtained outside the State/Country (refer Box No.4.3)	12.5%		
4.11)	Total			

### 5) Details of Tax Payment

5.1) Tax Payable	
5.2) TDS (certificate enclosed)	
5.3) Balance (Box 5.1 – 5.2)	
5.4) Tax paid	
5.5) Tax paid particulars Ch./DD/Challan No: _____ Date: _____ Bank _____	

I/We hereby declare that the particulars furnished above are true and complete in all respects.

Signature: \_\_\_\_\_ Name: \_\_\_\_\_ Status: \_\_\_\_\_  
Date: \_\_\_\_\_

6	ENTRY TAX		
	(Applicable to dealers' who are liable to tax under the Karnataka Tax on Entry of Goods Act, 1979)		
6.1	TOTAL PURCHASES : Value of goods liable for entry tax both Local, Interstate and Imports including freight and inward expenses : _____		
6.2	LESS: Purchases within the local Area, Purchases against Form-40		
6.3	Purchase Returns, Re-exports : _____		
6.4	Others : _____		
6.4	TAXABLE TURNOVER : _____		
CALCULATION OF ENTRY TAX PAYABLE			
	Description of Goods	Taxable Value	Tax Payable
6.5	Goods Taxable @ 1%		
6.6	Goods Taxable @ 2%		
6.7	Goods Taxable @ 5%		
6.8	Goods Taxable (others)		
6.9	TOTAL		
6.10	Tax paid particulars:- Rs. _____ Cash/DD/Challan No: _____ Date: _____ Bank: _____		
I/We declare that the particulars furnished above are true and complete in all respects.			
Place : _____		Signature :	
Date : _____		Name and designation/Seal :	
Incomplete forms will be deemed to be invalid and penalties relating to non-filing will apply.			
Note: If the Return is not applicable then it can be written as "N.A"			

7	<b>SPECIAL ENTRY TAX</b>		
	(Applicable to dealers who are liable to tax under the Karnataka Special Tax on Entry of certain Goods Act, 2004)		
7.1	TOTAL PURCHASES: Value of goods liable for KSTECG both Local, Interstate and		
7.2	Imports including freight and inward expenses	:	_____
	LESS:		
	a) Exemption (Please specify)	:	_____
	b) Purchase Returns	:	_____
	c) Re-exports	:	_____
	d) Others	:	_____
7.3	TAXABLE TURNOVER	:	_____
	Description of the Notified Goods	Taxable Value	Tax Payable
7.4	Goods Taxable @4%		
7.5	Goods Taxable @ 12.5%		
7.6	Goods Taxable (others)		
7.7	TOTAL		
7.8	Less: CST Paid as per Section 4(2) of KSTECG Act		
7.9	Balance Tax Payable		
7.10	Tax Paid particulars : Rs. _____ Cash / DD / Challan No: _____ Date : _____ Bank: _____ I/We declare that the particulars furnished above are true and complete in all respects. Place : _____ Signature : _____ Date : _____ Name & Designation / Seal : _____ Incomplete forms will be deemed to be invalid and penalties relating to non-filing will apply. Note : If the Return is not applicable then it can be written as "N.A."		



**FORM VAT 125**

[\[See Rule 44\(2\)\]](#)

**Monthly statement of tax deducted at source for the period from ..... to .....**

1.	Name and address of the tax Deducting Authority	
2.	Registration Certificate No. if registered under the Karnataka Value Added Tax Act, 2003	
3.	Total amount of payment made during the month	
4.	Total amount of tax deducted at source	
5.	Details of remittance. -  (a)Challan No. & date if remitted to Government Treasury/Bank	
	or	
	(b) Cheque, D.D. or Receipt No. & date if remitted to the VAT Office or VAT sub-office	
	or	
	(c) Details of book adjustment, if amount is adjusted in the office of the Accountant General	

**DECLARATION**

I, ..... do hereby solemnly declare that to the best of my knowledge and belief, the information furnished in this statement is true and complete.

Place:

Signature of the authorized person

Name:

Date :

Designation:

Seal of the Drawing Officer.



**FORM VAT 126**

[See Rule 44 (2)(a)]

**Monthly statement of tax deducted at source (in respect of industrial canteens)  
for the month of .....**

1.Name and address of the  
person deducting tax :

2.Registration Certificate No. :  
if registered under the Karnataka  
Value Added Tax Act, 2003.

3.Amount paid by the factory /  
industrial concern / establishment  
to the dealer running canteen /  
café / restaurant run in their premises  
as their contribution :

4.Amount received by the dealer from  
the employees :

5.Total amount received by the dealer  
towards sale of articles of food and  
drinks to the employees :

6.Amount of tax deducted at source :  
at 4%

7.Details of remittance :  
(a)Challan No. and date, if remitted  
to Government Treasury / Bank  
Or  
(b)Cheque, DD or Receipt No. and  
date if remitted to the Local VAT  
office or VAT Sub-office

**DECLARATION**

I, ..... do hereby solemnly declare that to the best of my knowledge and belief, the information furnished in the statement is true and complete.

Place:

Signature of the authorized person

Date:

Name and Status



**FORM VAT 127**

[\[See rule 44 \(2\)\(a\)\]](#)

**Monthly statement of tax deducted at source under section 18-A for the month of .....**

1. Name and address of the registered dealer deducting tax  
:
2. Registration Certificate No. (TIN) :
3. Description of the goods purchased in respect of which tax  
is deducted :
4. Total amount payable (on which tax is charged by the seller  
in the tax invoices) in respect of the above goods by the  
registered dealer during the month :
5. Total amount of tax payable (as charged in the tax invoices  
by the seller)
6. Amount of tax deducted at source at .....% :
7. Details of remittance  
  
(a)Challan No. and date, if remitted to Government  
Treasury / Bank Or  
(b)Cheque, DD or Receipt No. and date if remitted to  
the Local VAT office or VAT Sub-office

**DECLARATION**

I, ..... do hereby solemnly declare that to the best of my knowledge and belief, the  
information furnished in the statement is true and complete.

Place:

Date:

Signature of the authorized person

Name and Status ]



**FORM VAT 135**

[See Rules 138, 139 and 140]

**ANNUAL STATEMENT**

(Please fill up Part 2/3/4 whichever is applicable)

<b>1) General Information</b>			
1.1) Name :	1.4) Year :		
1.2) Address :	1.5) Type of statement :	Original/Revised	
1.3) TIN :	1.6) L.V.O./V.S.O. code :		

**2) For Trader, Manufacturer, Processor, Hoteliers, Restaurateurs, Caterers, Sweetmeat stall, Ice Cream parlours and Bakeries.**

Particulars	Amount in (Rs)
2.1) Total Turnover/Total consideration in the period	
2.2) URD purchases liable to tax u/s 3(2)	
2.3) Balance Turnover liable for composition tax (Box No..2.1 Less Box No.2.2)	

Sl.No.	Classification	Rate	Amount(Rs.)	TAX (Rs.)
2.4)	Composition rate of tax at 1%			
2.5)	Composition rate of tax at 4%			
2.6)	URD purchases liable to tax at 4%			
2.7)	URD purchases liable to tax at 12.5%			
2.8)	URD purchases liable to tax at other rates			
2.9)	Total Tax Due (Box No.2.4 to Box No.2.8)			
2.10)	Tax Paid			
2.11)	Tax paid particulars Ch./DD/Challan No.:_____ Date:_____ Bank:_____			
	I/We hereby declare that the particulars furnished above are true and complete in all respects.			
	Date :	Signature :		
	Place :	Name and designation :		
		Status :		

**3) For a dealer having mechanized stone crushing unit**

Sl.No.	Size of Crushing Machine	Number of Crushing Machine	Tax Per machinery (in case of Granite Metal Crushing unit)	Tax Per machinery (in case of non-granite Metal Crushing unit)	Total Tax Liability (Rs)
3.1)	39' X 9'		Rs. 16,500.00	Rs. 10,000.00	
3.2)	16' X 9'		Rs. 8,250.00	Rs. 5,000.00	
3.3)	12' X 9'		Rs. 4,000.00	Rs. 3,000.00	
3.4)	<b>Total Tax Due</b>				
3.5)	<b>Tax Paid</b>				

3.6) Tax Paid Particulars: Ch./DD/Challan No.\_\_\_\_\_ Date:\_\_\_\_\_ Bank:\_\_\_\_\_

I/We hereby declare that the particulars furnished above are true and complete in all respects.

Signature:\_\_\_\_\_ Name:\_\_\_\_\_ Status:\_\_\_\_\_ Date:\_\_\_\_\_

<b>4) For Works Contractors who purchases/obtains goods locally as well as from outside the State/Country</b>				
Particulars			Amount (Rs)	
4.1) Total consideration pertaining to works contract including the turnover of traded goods				
Less: 4.2) Sub contractor's turnover				
4.3) Value of Goods Purchased /obtained from outside the state/country and transferred in the execution of works contract.				
4.4) Turnover of Traded goods				
4.5) Balance turnover of works contract				
SL.No.	Classification	Rate	Amount(Rs)	TAX (Rs)
4.6)	Turnover liable for works contract (refer Box No.4.5)	4%		
4.7)	Turnover of Traded goods (refer Box No.4.4)	4%		
4.8)	Turnover of Traded goods (refer Box No.4.4)	12.5%		
4.9)	Value of goods purchased/obtained outside the State/Country (refer Box No.4.3)	4%		
4.10)	Value of goods purchased/obtained outside the State/Country (refer Box No.4.3)	12.5%		
4.11)	Total			
<b>Details of Tax Payment</b>				
4.12) Tax Payable				
4.13) TDS (certificate enclosed)				
4.14) Balance (Box 4.12 – 4.13)				
4.15) Tax paid				
4.16) Tax paid particulars Ch./DD/Challan No: _____ Date: _____ Bank _____				
I/We hereby declare that the particulars furnished above are true and complete in all respects.				
Signature: _____ Name: _____ Status: _____				
Date: _____				

<b>5 ENTRY TAX – ANNUAL STATEMENT</b>			
<b>(Applicable to dealers' who are liable to tax under the KTEG ACT, 1979)</b>			
5.1	TOTAL PURCHASES : Value of goods liable for entry tax both Local, Interstate and Imports including freight and inward expenses : _____		
	LESS:		
5.2	Purchases within the local Area, Purchases against Form-40		
	Purchase Returns, Re-exports : _____		
	Others : _____		
5.3	TAXABLE TURNOVER : _____		
5.4	<b>CALCULATION OF ENTRY TAX PAYABLE</b>		
	Description of Goods	Taxable Value	Tax Payable
	Goods Taxable @ 1%		
5.5	Goods Taxable @ 2%		
5.6	Goods Taxable @ 5%		
5.7	Goods Taxable (others)		
5.8	TOTAL		
5.9	Tax paid particulars:- Rs. _____ Cash/DD/Challan No: _____ Date: _____		
5.10	Bank: _____		
	I/We declare that the particulars furnished above are true and complete in all respects.		
	Place : _____	Signature :	
	Date : _____	Name and designation/Seal :	
	Incomplete forms will be deemed to be invalid and penalties relating to non-filing will apply.		
	Note: If the Return is not applicable then it can be written as ``N.A''		
<b>6 SPECIAL ENTRY TAX – ANNUAL STATEMENT</b>			
<b>(Applicable to dealers who are liable to tax under the Karnataka Special Tax on Entry of certain Goods Act, 2004)</b>			
	TOTAL PURCHASES:		
	Value of goods liable for KSTECG both Interstate and Imports including freight and inward expenses : _____		
	LESS:		
6.1			
6.2	a) Exemption (Please specify)	: _____	
	b) Purchase Returns	: _____	
	c) Re-exports	: _____	
	d) Others	: _____	
6.3	TAXABLE TURNOVER : _____		
	Description of the Notified Goods	Taxable Value	Tax Payable
6.4	Goods Taxable @4%		
6.5	Goods Taxable @ 12.5%		
6.6	Goods Taxable (others)		
6.7	TOTAL		
6.8	Less: CST Paid as per Section 4(2) of KSTECG Act		
6.9	Balance Tax Payable		
6.10	Tax Paid particulars : Rs. _____ Cash / DD / Challan No: _____ Date : _____		
	Bank: _____		
	I/We declare that the particulars furnished above are true and complete in all respects.		
	Place : _____	Signature :	
	Date : _____	Name & Designation / Seal :	
	Incomplete forms will be deemed to be invalid and penalties relating to non-filing will apply.		
	Note : If the Return is not applicable then it can be written as "N.A."		



FORM VAT 140

[\[See Rule 3\(2\)\(i\)\]](#)

**CERTIFICATE OF PAYMENT OF TAX BY AGENT**

I/We .....(full address)..... with.....(TIN) have sold.....(description of goods)..... (Quantity) for Rs ..... (Rupees .....) for the tax period.....on behalf of my/our principal

M/s.....

(address) .....

bearing TIN.....

The tax due of Rs..... has been collected and paid by me/us on the above sales.

**Particulars of goods sold**

Sl. No.	No. and date of tax invoice issued	Description of goods	Quantity	Value of goods	Remarks
1	2	3	4	5	6

Place:

Date:

Name and signature and status of the person signing the certificate.



**Form VAT 145**

[\[See rule 33 \(17\)\]](#)

**Declaration for purchase of goods on behalf of principal**

I/We .....(full address)..... with.....(TIN) have purchased.....(description of goods)..... (Quantity) for Rs ..... (Rupees .....)on behalf of my/our principal

M/s.....

(address) .....

bearing TIN..... and have paid the tax due of Rs.....has been paid by me/us on the above purchase.

**Particulars of goods purchase**

Sl. No.	No. and date of tax invoice issued by the seller	Description of goods	Quantity	Net value of goods purchased	Amount of tax	Remarks
1	2	3	4	5	6	7

Place:

Date:

Name and signature and status of the person signing the certificate.



**FORM VAT 152**

[\[See Rule 50\(1\)\(a\)\]](#)

**C H A L L A N**

Taxes on Sales Trade etc.

Major Head of Account: - 0040  
Remitted in

Challan No.

Date:

Place:

Name of the Bank:

Branch Name:

Treasury

(Code)

Remitter's TIN .....

Name .....

Address: .....

.....

Head of Account

Amount (in Rs.)

1. State VAT

01. Tax Collection

0040-00-110-1-01

02. Registration fee

0040-00-110-1-02

Total
-------

Amount (In words) Rupees:
---------------------------

Signature of the remitter / depositor
---------------------------------------

For use in Bank / Treasury

Received Rupees ..... only (in words) .....only

Date .....

Accountant

Treasurer / Treasury Officer

with Bank Seal

with Treasury Seal



**FORM VAT 153**

[\[See Rule 52\]](#)

**C H A L L A N**

Taxes on Sales Trade etc.

Major Head of Account: - 0040

Remitted in

	Challan No. ....
	Date: ....
	Place: ....

Name of the Bank:

Branch Name:

Treasury (Code)

Remitter's TIN

Name

Address:

Head of Account Amount ( in Rs.)

Other receipts under VAT

0040-00-110-1-04

Total

Amount (In words) Rupees:

Signature of the remitter / depositor

For use in Bank / Treasury

Received Rupees ..... only (in words ..... only

Date .....

Accountant

with Treasury Seal

Treasurer / Treasury Officer

with Bank Seal



**FORM VAT 155**

[\[See rule 53\]](#)

**Application for permission to pay finally assessed tax under the Karnataka Value Added Tax Act, 2003 in instalments**

To

.....

I,.....son of .....being an assessee under the Karnataka Value Added Tax Act, 2003, hereby apply for permission to pay in instalments the assessed tax due from me as per following details:

1. Name and address of the applicant	
2. TIN	
3. Sum for the payment of assessed tax or other amount due for which instalments are sought.	
4. If the sums in column 3 are payable under an order of assessment, the date of service of the service of notice in Form VAT 210 and in respect of other amounts due the date of service of relevant notice or order.	
5. The period within which permission to pay the sum in column 3 is sought.	
6. Reasons for the applicant's inability to pay the tax / other amount due within the specified date	
7. Any other relevant information (which the applicant may desire to furnish).	

**DECLARATIONS**

(1) I hereby declare that to the best of my knowledge and belief the information contained in the above application is true and correct.

(2) I hereby declare that no application for instalments has been made to any other authority in regard to the sums mentioned in column (3).

(3) I hereby declare that no sums other than those mentioned in column (3) are due from me on the date of making this application.

(4) I hereby undertake to pay interest at the rate of 15% per annum along with each instalment on the sums remaining unpaid from time to time.

(5) I hereby undertake to furnish necessary security to the satisfaction of the concerned assessing authority for the recovery of the sums in relation to which the grant of instalments is applied for.

Place:

Signature and name of the applicant:

Status:

Date:



**FORM VAT 157**

[\[See Rule 44\(3\)\(d\)\]](#)

Sl. No.	Date of issue of Certificate	Sl.No. of Certificate issued	Name and address of the Contractor to whom issued	Registration No. and the office of Registration of the Contractor
(1)	(2)	(3)	(4)	(5)

Amount paid towards works Contract executed	Amount of tax deducted	Details of remittance		
		(a)Challan No. & date if remitted to Government Treasury/Bank	(b)Cheque, D.D. or receipt No. & date if remitted to the VAT Office/ VAT sub-office	(c)Details of book adjustment, if the amount is adjusted at the office of the Accountant General, Bangalore
(7)	(8)	(9)		



## FORM VAT 159

[See Rule 44(3)]

Date of issue of certificate	Sl. No. of certificate issued	Name, Address and registration number of the dealer to whom issued	Amount paid by the factory / industrial concern / establishment to the dealer	Total amount received by the dealer from the factory / industrial concern / establishment and from the employees	Amount of tax deducted at 4% on total amount mentioned in Col.5
1	2	3	4	5	6

Details of remittance	
Challan No. & Date, if remitted to Government Treasury / Bank	Cheque, DD or receipt No. & date if remitted to the VAT Officer or VAT sub-office
7	8





**FORM VAT 165**

[\[See rule 130\(1\)\]](#)

**Application for refund of Input Tax under Section 21 of the  
Karnataka Value Added Tax Act, 2003.**

To

The Commissioner of

Commercial Taxes (K), Bangalore

(Name and address of United Nations Organisation, Embassy or Consulate)

Sir,

We have purchased goods liable to Value Added Tax for official use and request refund of the said taxes paid by us as detailed in the table below and supported by the original invoices attached and a schedule for each rate of tax detailed.

Purchases of goods taxable at 20%	
Purchases of goods taxable at 12.5%	
Purchases of goods taxable at 4%	
Purchases of goods taxable at 1%	
Total	

We certify that the purchases made relate to official expenditure of the aforementioned agency of the UN, Embassy or Consulate. In the case of an Embassy or Consulate we further certify that reciprocal arrangements are in place in the home Country or State of that Embassy or Consulate for refund of such taxes to Indian Embassies or Consulates\*. We also aware of the penalties applicable for making false declarations.

Place:

Signature and name of the applicant:

Date:

Designation:

\* Strike out if not applicable



**FORM VAT 170**  
 [See Rule 33(2)]  
**Register of Purchases made within the State**

Sl. No.	Date	Seller's Name (Input Supplier)	TIN No. of Seller	Description of the goods	Tax Invoice No. / Date	Value (RS.)			Input Tax (Rs.)		
						4%	12.5%	Others	4%	12.5%	Others
Total											

Date: Place:	Dealer's Signature with Stamp : Signatory Name : Designation :
-----------------	----------------------------------------------------------------------



**FORM VAT 240**

[\[See rule 34\(3\)\]](#)

**AUDITED STATEMENT OF ACCOUNTS UNDER SECTION  
31(4) OF THE KVAT ACT, 2003  
CERTIFICATE**

Certified that I / we being a Chartered Accountant / Cost Accountant / Tax Practitioner have audited the accounts of ..... (Name and address of the dealer) having registration No. (TIN) ..... for the year ending ..... and that subject to my / our observations and comments about non-compliance, short comings and deficiencies in the returns filed by the dealer, as given in the attached report,

- (1) the books of account and other related records and registers maintained by the dealer are sufficient for the verification of the correctness and completeness of the returns filed for the year;
- (2) the total turnover of sales declared in the returns include all the sales effected during the year;
- (3) the total turnover of purchases declared in the returns include all the purchases made during the year;
- (4) the adjustment to turnover of sales and purchases is based on the entries made in the books of account maintained for the year;
- (5) the deductions from the total turnover including deduction on account of sales returns claimed in the returns are in conformity with the provisions of the law;
- (6) the classification of goods sold, rate of tax applicable and computation of output tax and net tax payable as shown in the return is correct;
- (7) the computation of classification of goods purchased, the amount of input tax paid and deductions of input tax credit claimed in the return is correct and in conformity with the provisions of law;
- (8) the utilization of statutory forms under the KVAT Act ,2003 and the CST Act,1956 is for valid purposes; and
- (9) other information given in the returns is correct and complete.

Summary of the additional tax liability or additional refund due to the dealer on audit for the year are as follows: -

Sl.No.	Particulars	Amount as per return (in Rs.)	Correct amount determined on audit (in Rs.)	Difference (in Rs.)
1	Output tax payable under the KVAT Act, 2003			
2	Input tax deduction claimed under Section 10			
3	Ineligible input tax deduction under Section 11			
4	Refund of excess input tax credit claimed in the return			
5	Any other item (specify)			
6	Tax payable under the CST Act, 1956			

The dealer has been advised to file revised returns for the period / month ..... and,

(i) pay differential tax liability of Rs..... with interest of Rs..... and penalty of Rs.....,

(ii)claim refund of Rs..... and

(iii)revise the opening / closing balance of input tax credit of Rs.....

(Note: Strike out whichever is not applicable.)

Place

Signature

Date:

Name

Enrollment / Membership No.....

Enclosures: (1)Copies of Profit and Loss account and Balance Sheet

(2)Audit Report in Parts 1, 2 and 3

**PART-1  
GENERAL INFORMATION**

1	Name of the dealer	
2	Registration Certificate No. (TIN)	
3	(i)Status of the dealer (specify whether proprietor, etc.)  (ii)If partnership firm, name of all the partners	
4	Trade name and full address of the principal place of business	
5	(i) Full address of all additional places of business in the State(ii)Full address of all additional places of business outside the State	
6	Address of any branch or unit in the State having a different registration number (TIN)	
7	Nature of business (specify whether manufacturer, reseller, works contractor, etc.)	
8	Description of 10 major goods sold	
9	Whether opted for composition or not	
10	Whether filing returns monthly or quarterly	
11	Whether permitted under special accounting scheme or not	
12	Whether availing incentive as a new industrial unit(specify whether exemption/deferment)	
13	Whether registered under the KTEG Act, 1979 and enrolled / registered under the KTPTC & E Act, 1976	
14	Books of account maintained	
15	List of books of account examined	
16	Method of valuation of opening and closing stocks	

**PART – 2  
PARTICULARS OF TURNOVERS, DEDUCTIONS AND PAYMENT OF TAX**

1	Total and taxable turnovers	
2	Deductions claimed under the KVAT Act, 2003 (specify in respect of each deduction its nature and whether, it is in order and supported by prescribed documents)	
3	Details of taxable sales within the State	Description Taxable Rate Tax payableof goods turnover of tax

4	Details of purchases and receipts	Total value of purchases and receipts: Imports : Inter-state purchase : Inter-state stock transfer : Purchases from registered dealers within the State : Purchases from un-registered dealers within the State :
5	Details of input tax paid on purchases:	Description Taxable Rate Tax paid of goods value of tax
6	Details of input tax paid on purchases eligible for deduction (give details of capital goods separately and specify whether calculated on the basis of partial rebating formula)	Description Taxable Rate Tax paid of goods value of tax
7	Details of input tax paid on purchases ineligible for deduction (give details of capital goods and special rebate separately and specify whether calculated on the basis of partial rebating formula)	Description Taxable Rate Tax paid of goods value of tax
8	Details of input tax deduction claimed on purchases relating to inter-State sales and export sales (give details of capital goods and special rebate separately and specify whether calculated on the basis of partial rebating formula)	
9	Details of un-adjusted excess input tax credit carried over from the previous year and to the next year	
10	Total and taxable turnovers under the CST Act, 1956	
11	Deductions claimed (specify in respect of each deduction its nature, whether it is in order and supported by prescribed documents)	
12	Details of taxable sales	Description Taxable Rate Tax payable of goods turnover of tax
13	If the dealer has opted for composition indicate the type of composition scheme opted and details of the composition amount paid, its rate and the basis	
14	Details of returns filed	Month/ Due Date Penalty Date of payment Penalty Quarter Date of filing paid of tax paid
15	Details of inspection of the business premises / books of account of the dealer by departmental authorities on inspection / visit	Date of visit / Designation Additional Penalty CF Inspection of the tax levied collected Officer assessed

Note: Trading account in respect of each class of goods and manufacturing account in respect of each class of goods (whether taxable or not) along with accounting ratios on sales and other non-sale transactions has to be furnished separately. Wherever the Profit and Loss Account and Balance Sheet contain the details of transactions made outside the State, then the details relating to transactions within the State shall be suitably computed and declared separately.

**PART – 3**  
**PARTICULARS OF DECLARATIONS AND CERTIFICATES**

1	Details of sales as commission agent	Total Amount covered No. of forms BalanceAmount by Form VAT 140 filed
2	Details of purchases as commission agent	Total Amount covered No. of forms BalanceAmount by Form VAT 145 filed
3	Details of tax deducted at source from the amounts payable to the dealer	Total Amount covered No. of forms BalanceAmount by Form VAT 156/ filed 158 / 161
4	(i) Stock of declarations / certificates / delivery notes under the KVAT Act, 2003. Opening StockForms obtained during the year from CTDForms utilized during the yearLoss, if anyClosing Balance (ii) Details of any misuse of forms	VAT 140 VAT 145 VAT 156 VAT 158 VAT 161 VAT 505
5	(1) Stock of declarations / certificates under the CST Act, 1956. Opening StockForms obtained during the year from CTDForms utilized during the yearLoss, if anyClosing Balance (2) Details of any misuse of C Forms	Form C Form EI Form EII Form F Form H Number Amount of purchase involved Nature of misuse

The above audit report enclosed to my / our certificate is true and correct.

Place

Signature

Date:

Name"

\*Substituted as per notification No. FD 165 CSL 07 , dated: 26.07.2007



**FORM VAT 455**

[\[See rule 152\(2\)\]](#)

**Security Bond for stay of collection of tax or other amount in dispute**

**Before the Karnataka Appellate Tribunal / Joint Commissioner of Commercial Taxes.**

No.....of 20.....

Appellant:

Security bond executed in favour of the Government of Karnataka and his successors in office and assigns.

Whereas .....has filed an appeal before the Karnataka Sales Tax Appellate Tribunal / Joint Commissioner of Commercial Taxes at ..... against the order of.....in its / his ..... dated.....and the said appeal is pending and whereas the said appellant has applied for direction in regard to the payment of the disputed tax or other amount and has been called upon to furnish security accordingly, and in consideration whereof, I/We .....hereby personally undertake and bind myself / ourselves, my / our heirs, successors and legal representatives to pay the Government of Karnataka the sum of Rs.....and mortgage / charge the properties in the Schedule hereunto annexed for the payment of the sum of Rs.....to the Government of Karnataka and covenant that if the aforesaid appellant complies with all the directions in regard to the payment of tax or other amount made by the Karnataka Appellate Tribunal / Joint Commissioner of Commercial Taxes in the said appeal this bond shall be void and of no effect, otherwise it shall remain the full force and effect.

In witness whereof I/We.....have hereunto affixed my / our hands and seal this day of.....20.....at.....

Witnesses:

- 1.
- 2.

Appellant

Surety

**Note:Strike out whichever is not applicable.**



**FORM VAT 510**[\[See rule 157\(2\)\(c\)\]](#)**Register of delivery notes maintained under Rule 157 of the  
Karnataka Value Added Tax Rules, 2005****Receipts****Issues**

Date of receipt	Authority from whom received	Book Number	Serial Number	Date of Issue	Book Number
1	2	3	4	5	6
Serial Number	Name and address of the consignor (here enter whether the consignor is the selling or buying dealer or his selling agent or clearing agent or forwarding agent or buying agent etc.)		Name and address of the consignee	Description of goods	
7	8		9	10	
Quantity	Value of goods if the goods are purchased or sold	Tax Invoice No. & date	Authority to whom surrendered	Remarks	
11	12	13	14	15	



**FORM VAT 515**  
[\[See rule 157\(1\)\(a\)\]](#)  
**DELIVERY NOTE**

Sl.No.

Name, address and TIN of the issuing dealer.	
Jurisdictional LVO/SVO of the issuing dealer.	
I. Date of issue of the delivery note by the dealer (consignor).	
II. Full address of the place –	
i. From which they are consigned	
ii. To whom they are consigned	
III. Name, address and TIN/CST Registration Certificate No. of the consignee including his relationship with the consignor, if the consignee is different from the consignor.	
IV. Description of the goods-	
(i) Name or class of goods consigned	
(ii) Quantity or weight	
(iii) Value of the goods	
V. (i) Name and address of the owner of the goods vehicle or vehicle by which the goods are consigned.	
(ii) Registration number of the goods vehicle or vessel.	
(iii) LR/GC Note No. and date	
VI. (a) Purpose of transport of goods	(a) For sale/for line sale/for deliver to the buyer/transfer to (shop/head office/ branch/ godown/ depot/principal) after purchase/ transfer to (dept/godown/branch head office/consignment agent/ commission agent)/for job work/return after job work/other (Tick whichever is applicable)
(b) Serial number, date and nature of other document(s) accompanying the goods (tax invoice/self purchase bill/consignment note/stock transfer memo/labour charges voucher, etc.)	(b)

I/We certify that to the best of my/our knowledge the particulars furnished are true and correct.

Name and signature of the person to whom the goods were delivered for transporting with status of the person signing.  
Name and signature of the consignor / his agent / manager.

Notes: (1)Original to be furnished to the prescribed authority. Duplicate to be retained by the purchasing dealer or the person to whom goods were delivered for transporting. Triplicate to be retained by the consigning dealer.  
(2) The entries in this Form should be made in ink. In the case of delivery notes issued in respect of goods intended for transfer to a place outside the State of Karnataka, entries should be made in English. In other cases of transport such entries may be made either in English or in the official language of the State, namely Kannada.  
(3) Any correction made in the Form should be duly attested by the person signing the Form.



**FORM VAT 520**

[\[See rule 157\(3\)\(b\)\]](#)

**Register of delivery notes in Form VAT 515**

Sl. No.	Date of receipt of new stock	No.of delivery notes received	Date of issue	Sl.No. of delivery note	Name and address of the consignor	Name and address of the consignee
(1)	(2)	(3)	(4)	(5)	(6)	(7)
Description of goods	Quantity	Value of goods	Purpose of transport	Sl.No. and date of sale bill or other document	Sales tax authority to whom surrendered	Remarks
(8)	(9)	(10)	(11)	(12)	(13)	(14)



**FORM VAT 530**

[\[See rule 161\(1\)\]](#)

**Application for Issue of Transit Pass**

Original/Duplicate/Triplicate

To

The Officer-In-Charge

.....Check-post

Sir,

I, ..... son of ..... Sri ..... resident of ..... (full address) hereby declare that I am the owner/driver of vehicle No..... belonging to..... (name and address of the owner / transporting agency).

I hereby declare that the consignments detailed in the Annexure being carried by the above vehicle are meant for destination in other States. They will not be unloaded or delivered anywhere in Karnataka State.

My vehicle will cross Karnataka State .....(name of the other State) ..... border at.....check-post on or before.....(date) and by.....hours (time).

Date.....

Signature.....

Time.....

Status.....

Place.....

**TRANSIT PASS**

Serial No.....

Vehicle No..... carrying the consignments mentioned in the Annexure is permitted to cross the Karnataka State .....(name of the other State) border at .....Checkpost by.....hours on or before.....(date), via (National Highway/State Highway/District Roads).....(mention details of route)

Place.....

Signature of the Officer

Date/ Time .....

In-charge of Entry Checkpost

(seal)

Extension of Time

Time extended upto hours.....on or before..... (date).....

Place.....

Signature of the officer extending the time

Date.....

(Full Name, Designation with seal).

Certified that I have received the duplicate copy of this pass.

Place.....

Signature of the officer

Date.....

In-charge of the Exit Check post

(Seal).

SL. NO.	G.C. Note No.	Name and full Address of Consignee	Name and full Address of Consignor	Description of Goods	Quantity	Value
1	2	3	4	5	6	7



**FORM VAT 545**

[\[See rule 168\]](#)

**Application for enrolment as a Tax Practitioner**

To,

The Commissioner of Commercial Taxes in Karnataka, Bangalore.

I, ..... (\*a partner of the firm known as .....) (address) ..... hereby apply for enrolment of my name in the list of Tax Practitioners under sub-rule (8) of Rule 168 of the Karnataka Sales Tax Rules, 2005.

I declare that I am qualified to attend before any Authority under Section 86 of the Karnataka Value Added Tax Act, 2003, in accordance with sub-rule (2) of Rule 168 of the said Rules, in that-

\* (a) I have appeared before ..... (name and designation of Sales Tax Authority) on behalf of ..... in the ..... proceedings under Section ..... of the Karnataka Sales Tax Act, 1957 for not less than two years, otherwise than in the capacity of an employee or relative of the said dealer for which I attach herewith a true copy of the certificate granted by .....

\* (b) I am a retired officer of the Commercial Tax Department of the Government of ..... State and while in service I had worked as ..... which is a post not lower in rank than that of a VAT Sub-officer for a period of not less than two years.

\* (c) I have acquired the necessary educational qualification namely ..... of ..... in the examination held at ..... in the month of ..... the year ..... which is one of the qualification specified in sub-rule (2) of rule 168.

\* (d) I have passed the necessary final examination, viz ..... held at ..... in the month of ..... the year ..... specified in sub-rule (2) of Rule 168.

The above statements are true to the best of my knowledge and belief.

Place: .....

Date : .....

Signature .....

\*Strike out whichever is not applicable.

**ACKNOWLEDGMENT**

Received an application in Form ..... from ..... for enrolment under Rule 168(2) of the Karnataka Value Added Tax Rules, 2005.

Place: .....

Date : .....

Receiving Officer.

Serial No.....



**END OF FORMS**