



APPLICATION FOR CLAIM FOR NEGATIVE EXCISE DUTY ON ELECTRIC MOTOR CAR AND ELECTRIC GOODS VEHICLE

PART I - PARTICULARS OF APPLICANT

1	Name and Address of Importer	5	Tel No. Mobile No Fax No. Email address:
2	Name of Purchaser (Individual):	6	Name of Bank of Purchaser (Individual) (Mandatory):
3	Official Address of Purchaser (Individual):		Bank Account No of Purchaser (Individual) (Mandatory):
4	NIC/ Passport No. of Purchaser (Individual) (Mandatory):	7	Tax Account No of Purchaser (Individual):
8	Bill of Entry No (if any):..... <u>Details of the electric motor car or the electric goods vehicle*</u> Make: Model: Engine Number: Chassis Number: Power Rating:		

PART II – DECLARATION BY APPLICANT

I, hereby, make application for claim for negative excise duty for electric motor car or electric goods vehicle*, and undertake to submit the undermentioned documents , together with this form –

- (a) copy of NIC/ Passport;
- (b) bank statement showing account number and name of applicant;
- (c) copy of sale contract for purchase of electric motor car or electric goods vehicle duly registered with the Registrar-General's Department;
- (d) copy of Bill of Entry (if any); and
- (e) any other document that may be required.

I, the undersigned,, hereby declare that all particulars furnished and the documents submitted are true and correct.

.....
Signature of Purchaser (Individual)

.....
Date

*Note: Any application will be considered null and void in case the applicant fails to submit the required documents within **15 days** from the date of the application.*

PART III – FOR OFFICIAL USE ONLY

In relation to the application made -

- (a) Bill of Entry number for the electric motor car / electric goods vehicle*:
- (b) Value at importation of the electric motor car / electric goods vehicle*: Rs
- (c) Amount to be refundedrupees (*in words*), Rs..... (*in figures*).

Remarks:.....

Application processed By:

Name of Officer: Grade:

Signature: Employee No:

Date:...../...../20.....

Application for refund authorised By:

Name of Officer: Grade: (Team Leader / Section Head*)

Signature: Employee No:

Date:...../...../20.....

Notice of Approval/Rejection sent to FAD on /..... /20..... with Serial Number

**Delete as appropriate*