

THE ASSAM VALUE ADDED TAX RULES, 2005
FORM-65
[See Rule 41(9)(vii)]

TRIP SHEET TO BE SUBMITTED IN TRIPLICATE

Name and address of the Transport Company

.....

Vehicle Number

.....

Name and address of the owner of the vehicle

.....

Name and address of the driver of the vehicle

.....

Sl. No.	G. R. No.	Consigner	Consignee	Station from	Station to	Description of goods	Weight quantity/ number of goods	Value of goods	If the goods are despatched to a place in Assam number of form of declaration for import
1	2	3(a)	3(b)	4	5	6	7	8	9

In case the goods are to be transported through the State

Name of the exit check post	Date upto which the vehicle is to cross the exit check post
10(a)	10(b)

I, hereby declare that the information given above is true to the best of my knowledge and belief.

Place

Signature

Date

(Full Name)

Status

To be filled by officer-in-charge of Entry Check Post

To be filled by officer-in-charge of Exit Check Post

S. N. of date upto which the vehicle is to cross Exit
R-3 Check post

S. N. of Actual date of crossing the exit check post
R-4

Signature and seal of the officer I/C of Entry Check
Post

Signature and seal of the officer I/C of Exit Check Post