Original Duplicate Triplicate Quadruplicate

Application for removal of stainless steel patties/pattas manufactured under the special procedure

Name of the Factory. Address	
patties/pattas at and holder(s) been permitted to notification issued my/our production above-mentioned employ the cold re during the year	 residing

No.of cold rolling	Rate prescribed in Government	Sum	Total
Machines to be	of India	payable	
installed	Notification No. /2001- Central		
and employed	Excise dated		
(1)	(2)	(3)	(4)

- 4. I/We tender herewith the sum of Rs.....(Rupees.....only). The balance will be paid by me/us in monthly instalments.
- 3. I/We hereby declare that the particulars furnished herein are true and complete to the best of my/our knowledge and belief.
- 6. I/We apply for leave to remove from the above mentioned premises during the period from ......to......any stainless steel patties/pattas manufactured in the said premises during that period.
- 7. I/We understand that the permission accorded to me/us for the year......is subject to my/our paying the balance amount as indicated in paragraph 2 above.

Date		
То	Signature	of manufacturer or his authorized agent
The Superintende	ent of Central Excise	
	Range	
COUNTERSIGNED		
Place		
Date		Superintendent of Central ExciseRangeCircle
Statement of duty paid:		
(a) For payment in ca		Treasury State Bank of India Reserve Bank of India
(To be filled in by the ma	anufacturer or his autho	prised agent)
Name of person tendering payment	Particulars of payment	Amount(in words as well as in figures)
(1)	(2)	(3)
Date(To be filled in by the Tre	ounded levy scheme.	Signature of the tenderer eived payment of rupees (in
	or Accountant	Signature of Treasurer
(c) For payment thro	or Accountant ugh account-current:	Agent or Manager
Title of Account of	Number and date of	Amount (in words as well as in
Ledger (1)	entry (2)	figures (3)
Place Date	· · · · · · · · · · · · · · · · · · ·	, ,
	Signati	ure of the manufacturer or his Authorized

(e) For payment through T.R.5/Special Revenue Money Order

agent.

Date of	T.R.5 No./Special Money Order	Amount(in words as well
Payment	Coupon No.	as in
_		figures)
(1)	(2)	(3)

Place	
Date	

Clearance allowed subject to fulfillment of the condition of deposits

Superintendent of Central Excise

Note: Delete the entries not applicable.