ST Form - III

Application for Sales Tax Exemption on Services

Ref. No.:_____ **Date:** _____

The Director
Department of Revenue & Customs
Ministry of Finance

Sir/Madam,

The undersigned on behalf of (Organization/Agency Name) _____
hereby apply for exemption of Sales Tax on (please tick ☐):

1. Type of Services
☐ Hotels/Restaurants/Catering Services
☐ Entertainment Services (Cable TV/Cinema)
☐ Others: _____

2. Services availed for (Purpose)
☐ Workshop/Meeting/Seminar/Mission
☐ Visiting Guest
☐ Others:_____

3. Service Provider Details:
Name :_____
STCA No.(TPN):_____
Address :_____
_____

4. Source of Fund; ***(Details of funding Agency)***
_____
_____
_____
_____

5. Details of Visiting Guest/Participants/Individuals

Sl. No.	Name of Guest/Participants/individuals	PP/CID/TPN No.	Duration		Remarks
			From Date	To Date	

(Signature, Name & Designation of Applicant)

Notes:

i. Undertaking Note (GP Form II) affix with legal stamp must be enclosed.
ii. All subsequent sheet(s) should bear ref. no. & dt. of application and name & signature of the applicant.