FORM ST-4

Form of Appeal to the Commissioner of Central Excise (Appeals)
[under section 85 of the Finance Act, 1994 (32 of 1994)]

1. No.___________of______20___ : 

2. Name and address of the appellant : 

3. Designation and address of the officer passing the decision or order appealed against and the date of decision or order : 

4. Date of communication of the decision or order appealed against to the appellant : 

5. Address to which notices may be sent to appellant : 

5A. (i) Period of dispute : 

(ii) Amount of service tax, if any, demanded for the period mentioned in column (i) : 

(iii) Amount of refund, if any, claimed for the period mentioned in column (i) : 

(iv) Amount of interest : 

(v) Amount of penalty : 

(vi) Value of the taxable service for the period mentioned in column (i) : 

6. Whether service tax or penalty or interest or all the three have been deposited? : 

6(A) Whether the appellant wishes to be heard in person? : 

7. Relief claimed in appeal : 

STATEMENT OF FACTS

Grounds of appeal

Signature of the authorised representative, if any 

Signature of the appellant
Verification

I, ______________________ the appellant, do hereby declare that what is stated above is true to the best of my information and belief.

Verified today, the __________________ day of _____________

Place: __________________________
Date: __________________________

Signature of the authorized representative, if any
Signature of the appellant or his authorized representative

Note :- The form of appeal including the statement of facts and the grounds of appeal shall be filed in duplicate and shall be accompanied by a copy of the decision or order appealed against.