Form GST REG-30

[See rule 25]

Form for Field Visit Report

Center Jurisdiction (Ward/Circle/Zone)

Name of the Officer:- << to be prefilled>>		
Date of Submission of Report:-		
Name of the taxable person		
GSTIN/UIN –		
Task Assigned by:- < Name of the Authority- to be prefilled>		
Date and Time of Assignment of task:- < System date and time>		

Sr. No.	Particulars	Input	
1.	Date of Visit		
2.	Time of Visit		
3.	Location details :		
3.	Latitude	Longitude	
	North – Bounded By	South – Bounded By	
	West – Bounded By	East – Bounded By	
4.	Whether address is same as mentioned in	Y / N	
7.	application.		
5.	Particulars of the person available at the		
3.	time of visit		
(i)	Name		
(ii)	Father's Name		
(iii)	Residential Address		
(iv)	Mobile Number		
(v)	Designation / Status		
(vi)	Relationship with taxable person, if		
	applicable.		
6.	Functioning status of the business	Functioning - Y / N	
7.	Details of the premises		
	Open Space Area (in sq m.) - (approx.)		
	Covered Space Area (in sq m.) -		
	(approx.)		
	Floor on which business premises		
	located		
8.	Documents verified	Yes/No	
9.	verification is conducted.	erson who is present at the place where site	
10.	Comments (not more than < 1000 characters>		
10.	Signature		
	Place:	Name of the Officer:	
	Date:	Designation:	
	Jurisdiction:		