## FORM-GST-RFD-07

[See rule 92(1), 92(2) & 96(6)]

Reference No.

То

(GSTIN/UIN/Temp.ID No.)

\_\_\_\_\_ (Name)

(Address)

Acknowledgement No. ....

Dated........<DD/MM/YYYY>......

## Order for Complete adjustment of sanctioned Refund

# <u>Part- A</u>

Sir/Madam,

With reference to your refund application as referred above and further furnishing of information/ filing of documents against the amount of refund sanctioned to you has been completely adjusted against outstanding demands as per details below:

	Refund Calculation	Integrated	Central	State/ UT	Cess
		Tax	Tax	Tax	
i.	Amount of Refund claimed				
ii.	Net Refund Sanctioned on Provisional Basis (Order Nodate)				
iii.	Refund amount inadmissible rejected < <reason dropdown="">&gt;</reason>				
iv.	Refund admissible (i-ii-iii)				
v.	Refund adjusted against outstanding demand (as per order no.) under existing law or under this law Demand Order No date <multiple be="" given="" may="" rows=""></multiple>				
vi.	Balance amount of refund	Nil	Nil		Nil

I hereby, order that the amount of claimed / admissible refund as shown above is completely adjusted against the outstanding demand under this Act / under the existing law. This application stands disposed as per provisions under sub-section (...) of Section (...) of the Act.

#### OR

## <u>Part-B</u>

#### Order for withholding the refund

Date: <DD/MM/YYYY>

This has reference to your refund application referred to above and information/ documents furnished in the matter. The amount of refund sanctioned to you has been withheld due to the following reasons:

Refu	nd Order No.:				
Date	of issuance of Order:				
Sr. No.	Refund Calculation	Integrated Tax	Central Tax	State/UT Tax	Cess
i.	Amount of Refund Sanctioned				
ii.	Amount of Refund Withheld				
iii.	Amount of Refund Allowed				

Reasons for withholding of the refund:

<<*Text*>>

I hereby, order that the amount of claimed / admissible refund as shown above is withheld for the above mention reasons. This order is issued as per provisions under sub-section (...) of Section (...) of the Act.

Date: Place: Signature (DSC): Name: Designation: Office Address: