FORM-GST-RFD-08

[See rule 92(3)]

Notice for rejection of application for refund

| SCN No.: <dd mm="" yyyy=""></dd> | | Date: |
|-------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| To | | |
| | (GSTIN/ UIN/ Temporary ID) | |
| | (Name) | |
| | (Address) | |
| ACKN | IOWLEDGEMENT No | |
| ARN. | Dated . | <dd mm="" yyyy=""></dd> |
| | as reference to your above mentioned application for amination, it appears that refund application is liables: | |
| Sr No | Description (select the reasons of inadmissibility of refund from the drop down) | Amount Inadmissible |
| i. | | |
| ii | | |
| iii | Other{ any other reason other than the reasons mentioned in 'reason master'} | |
| You as | l re hereby called upon to show cause as to why yo | ur refund claim, to the extent of the amount |
| ☐ You of this | ed above, should not be rejected for reasons stated are hereby directed to furnish a reply to this notice notice. are also directed to appear before the undersigned | e within fifteen days from the date of service |
| | fail to furnish a reply within the stipulated date of ted date and time, the case will be decided ex pa | |
| Date: Place: | | Signature (DSC): Name: Designation: Office Address: |