**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. 2.

3.

4.

5. 5A.

No. of 20\_\_\_

Name and address of the appellant

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

Date of communication of the decision or order appealed against to the appellant

(i) (ii)

(iii)

(iv) (v)

(vi)

Address to which notices may be sent to appellant

Period of dispute

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

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

Amount of interest

Amount of penalty

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

**:**

**:**

**:**

**:**

**:**

6.

6A. 7.

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

Whether the appellant wishes to be heard in person?

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 authorised representative, if any

Signature of the appellant

or his authorised 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.