

DOMESTIC TAXES DEPARTMENT

FORM E.9 (rr.241, 242,243,244,245.250, 251,252,244A,254, 255)

DECLARATION AND CLAIM FOR REMISSION/REFUND/REBATE

(In duplicate)

hereby apply	for a (1) remiss		bate / /refund tioned deliveries.		e duty in amount of shilli				ed in the month	
Particulars										
Document reference	date of transaction	Nature of Transaction	Sold to (Full name & Address)	Tariff	Description of goods	Quantity	Unit of measure	Value of Goods	Excise Duty	
									1	
			TOTALS							
-	orting documen									
			et of which this claim for a rem If that the full excise duty there				our premise	s at		
<i>Place</i>					Claimant					
Date										



