

**THE ASSAM TAX ON LUXURIES (HOTELS AND LODGING
HOUSES) RULES, 1989.**

FORM - 11

Form of application for revision.

[See rule 13 (2)]

To

The..... (Revisional authority)

The..... day of.....19

1. Name and Address of Applicant(s) :
2. Period of assessment :
3. Authority passing the original order in dispute :
4. Date on which the order was communicated :
5. Number and date of the original/ certified copy of the order appealed against. :
6. Address to which notice may be sent to the applicant (s) :
7. Ground (s) of revision.
 - (1)
 - (2)
 - (3)
 - (4)
8. Relief claimed in revision application. :

Signature of applicant (s)

VERIFICATION

I/we..... the applicant (s) do hereby declare that the statement made in this application for revision are true to the best of my/our knowledge and belief

Verified today the.....day of.....(year)

Signature of the petitioner