

**SHOW CAUSE NOTICE FOR FAILURE TO FILE RETURN AND MAKE
PAYMENT OF TAX, INTEREST DUE AS PER THE RETURN**

[See clause(a) of Sub-rule (1) of rule 39)

01. Office address

D	D		M	M		Y	Y	Y	Y
		-			-				

02. TIN

SRIN

03. Name and address of the dealer

Indicate ☒ mark which ever is applicable

04. This office records reveal that you have failed to
- (i) pay the amount of tax due relating to the return for the tax period _____ to _____, or revised return for the Tax period _____ to _____ :or
 - (ii) deposit the tax due in the return / revised return for the tax period _____ to _____ on or before the due date and the period of delay is ____ months and ____ days: or
 - (iii) file the return for the tax period ____ to ____ :or
 - (iv) file the return for the tax period ____ to ____ within the due date i.e. _____ and the period of delay is ____ days.
05. You are now directed to show cause as to why interest under sub-section(1) and/or penalty as provided under Sub-section(2) and/or Sub-section(3) of Section 34 of the Orissa Value Added Tax Act, 2004 , shall not be levied on you for such default.
06. Your explanation must reach this office within **fourteen days** from the date of service of this notice, failing which interest and/or penalty as provided under the Act shall be imposed without any further reference to you.

Assessing Authority

Office Seal

Signature and Seal

Place _____
Date _____