Department of Trade and Taxes

Government of NCT of Delhi

**Form DVAT 16A**

*[See Rule 5A]*

**Form of return to be furnished by a Casual Trader**

**Return for the period** **From……….To…………(dd/mm/yy)**

1. (i) Name of the casual trader
   1. Address (Local)
2. Registration number

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 3. | Period during which sales conducted | | | | From……...To……….…(dd/mm/yy) | | | | |  |
| 4. | Details of declarations in Forms DVAT 34 and DVAT 35 issued, if any | | | | | | |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  | **Type of Forms** | **No. of Forms issued** | | | **No. of Forms used\*** | | | **Balance unused Forms\*\*** | | |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  | Serial Number | | Total | Serial Number | | Total | Serial Number | | Total |
|  |  | from | to |  | from | to |  | from | to |  |
|  | |  |  |  |  |  |  |  |  |  |
| **DVAT-34** | |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |
| **DVAT-35** | |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |

* Please attach duplicate copies of used Forms
* Please attach unused Forms

5. Total Value of Sales

6. Computation of Tax payable

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Description** |  |  |  | Turnover (Rs.) | | | | | | | |  | Tax payable (Rs.) | | | | | | | | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Goods taxable at 1% |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Goods taxable at 4% |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Goods taxable at 12.5% |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Goods taxable at 20% |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Works contract taxable at 4% |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Works contract taxable at 12.5% |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Exempt sales |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Total |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 7. | Tax Payable | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 8. | Add : Interest, if payable | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 9. | Add : Penalty, if payable | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 10. | Less : Tax Deducted at Source (TDS) |  |  |
|  | (Attach original TDS Certificates) | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 11. | Less : Tax paid | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 12. | Balance payable/refundable (7+8+9-10-11) | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

13. Details of payment of tax (attach proof of payment)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| S. No. | Date of deposit | Challan No. | Name of Bank and Branch | Amount |
|  |  |  |  |  |
|  |  |  |  |  |

14. Verification

I/We \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby solemnly affirm and declare that the information given in this form and its attachments (if any) is true and correct to the best of my/our knowledge and belief and nothing has been concealed therefrom.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature of authorised signatory | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| Name | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| Designation/Status | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| Place | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| Date | \_\_\_ \_\_\_ / \_\_\_ \_\_\_ / \_\_\_ | | \_\_\_ \_\_\_ \_\_\_ |
|  | dd / | mm / | yyyy |