FORM CAAR-3

[See regulation 10(2)] Appeal to the Appellate Authority for Advance Ruling

1.	Advance Ruling/ Order Number with the Date & the Authority	
2.	Date of Communication of the Ruling/ Order	
3.	Details of the Appellant Principal Commissioner/ Commissioner of Customs.	
4.	Details of Applicant	
	(i) Full name	
	(ii) Complete address	
	(iii) Telephone number (with STD/ISD code)	
	(iv) Fax number (with STD/ISD code)	
	(v) E-mail address	
	(vi) Postal address (to be provided if different from (ii) above)	
	(vii) Permanent Account Number (Income Tax) of the applicant (if any).	
5.	Details of Authorized Representative (if any)	
	(i) Full name	
	(ii) Complete address	
	(iii) Telephone number (with STD/ISD code)	
	(iv) Fax number (with STD/ISD code)	
	(v) E-mail address	
	(vi) Postal address (to be provided if different from (ii) above)	
6.	Brief facts of the case	
7.	Grounds of Appeal	
	List of documents/statement attached	
8.	(attach the list on a separate sheet, if	
	necessary.	
	In view of the foregoing, it is respectful Delhi may be pleased to:	Prayer illy prayed that the Ld. Appellate Authority, New
	a. set aside/modify the impugned advance ruling/ order passed by the Authority for Advance Ruling as prayed above;	
	b. grant a personal hearing; andc. pass any such further or other	order (s) as may be deemed fit and proper in facts
	and circumstances of the case. And for this act of kindness, the appell	

VERIFICATION

I, (n	ame in full and in block letters), son/daughter/wife of
do hereby solemnly declare that to the	he best of my knowledge and belief information and statements furnished in
above format and in the annexure(s) thereto including the documents enclosed are correct. I am making this
application in my capacity as	(designation). I am competent to make and verify this appeal.
Place:	
Date:	
	(Signature of Appellant Principal Commissioner/ Commissioner of Customs)
	(ANANTH RATHAKRISHNAN)
	Dy. Secy. to the Government of India)

[F.No. 275/16/2018-CX.8A(Pt)]