

Form GST REG-30

[See Rule ---]

Form for Field Visit Report

Center/State Jurisdiction (Ward/Circle/Zone)

Name of the Officer:- << to be prefilled>>		
Date of Submission of Report:-		
Name of the taxable person		
GSTIN/Unique ID Number –		
Task Assigned by:- < Name of the Authority- to be prefilled>		
Date and Time of Assignment of task:- < System date and time>		

Sr. No.	Particulars	Input
1.	Date of Visit	
2.	Time of Visit	
3.	Location details :	
	Latitude	Longitude
	North – Bounded By	South – Bounded By
	West – Bounded By	East – Bounded By
4.	Whether address is same as mentioned in application.	Y / N
5.	Particulars of the person available at the time of visit	
(i)	Name	
(ii)	Father's Name	
(iii)	Residential Address	
(iv)	Mobile Number	
(v)	Designation / Status	
(vi)	Relationship with taxable person, if applicable.	
6.	Functioning status of the business	Functioning - Y / N
7.	Details of the premises	
	Open Space Area (in sq m.) - (approx.)	
	Covered Space Area (in sq m.) - (approx.)	
	Floor on which business premises located	
8.	Documents verified	Yes/No
9.	Upload photograph of the place with the person who is present at the place where site verification is conducted.	
10.	Comments (not more than < 1000 characters>	
	Place: Date:	Signature Name of the Officer: Designation: Jurisdiction:

