

[FORM GST DRC - 01
[See rule 100 (2) & 142(1)(a)]

Reference No:

Date:

To

_____GSTIN/Temp. ID

----- Name

_____Address

Tax Period -----

F.Y. -----

Act -

Section / sub-section under which SCN is being issued -

SCN Reference No. ----

Date ----

Summary of Show Cause Notice

(a) Brief facts of the case :

(b) Grounds :

(c) Tax and other dues :

(Amount in Rs.)

Sr. No.	Tax rate	Turnover	Tax Period		Act	POS (Place of Supply)	Tax	Interest	Penalty	Fee	Others	Total
			From	To								
1	2	3	4	5	6	7	8	9	10	11	12	13
Total												

]¹

¹ Substituted vide Notf No. 79/2020-CT dt 15.10.2020

Signature

Name

Designation

Jurisdiction

Address

Note -

1. Only applicable fields may be filled up.
2. Column nos. 2, 3, 4 and 5 of the above Table i.e. tax rate, turnover and tax period are not mandatory.
3. Place of Supply (POS) details shall be required only if the demand is created under the IGST Act.]²

² Substituted vide Notf No. 16/2019-CT dt. 29.03.2019wef 01.04.2019