Signature(s) of obligor(s).	
Date:	
Place:	
Witnesses	
(1) Name and Address	Occupation
(2) Name and Address	Occupation
Date	
Place	
Witnesses	
(1) Name and Address	Occupation
(2) Name and Address	Occupation
(2) Name and Address	Occupation
Accepted by me this	day of (month) (year)
• •	
	for and on behalf of the President of India./
	Governor of (state)".
	Form GST ASMT - 06
	[See rule 98(5)]
Reference No.:	Date:
То	
GSTIN -	
Name -	
Address -	
Application Reference No. (ARN)	Date
Provisional Assessment order no	Date
Notice for seeking additional information /	clarification / documents for final assessment
Please refer to your application and provis documents are required for finalization of pro	sional assessment order referred to above. The following information / ovisional assessment:
<< text >>	
receipt of this notice to enable this office to	information /documents within a period of << 15 days>> from the date of take a decision in the matter. Please note that in case no information is on is liable to be rejected without making any further reference to you.
You are requested to appear before the	he undersigned for personal hearing on << Date TimeVenue>>.

Signature

Name

Designation