FORM 7 Register under rule 9(1) of the Central Sales Tax (Delhi) Rules, 2005

Date of dispatch of goods	Name and full address of the transferee	Name of State to which goods transferred	State here whether the transferee is to your Head Office/Branch/ Agent/Principal	Registration certificate No. of the transferor of goods		Descri ption of goods Despat ched	Quan tity of goods despa tched	Name of the carrier (i.e. rail/transport company/air company) and RR/GR No. etc. or other relevant particulars	Particul ars of challan or other docume nts coverin g the goods received	Sl. No. of declarat ion in Form F' received from the transfer ee of goods	Remarks
				Under Central Act	Under General Sales Tax/ Value Added Tax law of relevant State						
1	2	3	4	5	6	7	8	9	10	11	12