

Form GST REG-30

[See rule 25]

Form for Field Visit Report
Center Jurisdiction (Ward/Circle/Zone)

| | | |
|---|--|--|
| Name of the Officer:- << to be prefilled>> | | |
| Date of Submission of Report:- | | |
| Name of the taxable person | | |
| GSTIN/UIN – | | |
| 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: |