FORM GST INS-1

AUTHORISATION FOR INSPECTION OR SEARCH

[See rule 139 (1)]

То							
	ame and Designation of officer) Whereas information has been presented before me and I have reasons to believe t—						
A.	M/s						
	has suppressed transactions relating to supply of goods and/or services has suppressed transactions relating to the stock of goods in hand, has claimed input tax credit in excess of his entitlement under the Act has claimed refund in excess of his entitlement under the Act has indulged in contravention of the provisions of this Act or rules made thereunder to evade tax under this Act;						
	OR						
В.	M/s						
	escaped payment of tax have been stored						
	OR						
C.							
	goods liable to confiscation / documents relevant to the proceedings under the Act are secreted in the business/residential premises detailed herein below << Details of the Premises>						
Th	erefore,—						
	in exercise of the powers conferred upon me under sub-section (1) of section 67 of the Act, I authorize and require you to inspect the premises belonging to the above mentioned person with such assistance as may be necessary for inspection of goods or documents and/or any other things relevant to the proceedings under the said Act and rules made thereunder.						
	OR						
	in exercise of the powers conferred upon me under sub-section (2) of section 67 of the Act, I authorize and require you to search the above premises with such assistance as may be						

necessary, and if any goods or documents and/or other things relevant to the proceedings under the Act are found, to seize and produce the same forthwith before me for further action under the Act and rules made thereunder.

Any attempt on the part of the person to mislead, tamper with the evidence, refusal to answer the questions relevant to inspection / search operations, making of false statement or providing false evidence is punishable with imprisonment and /or fine under the Act read with section 179, 181, 191 and 418 of the Indian Penal Code.

Given under m	y hand & s	eal this	day	of	(month) 20	(year).	Valid for
day(s).							

Seal

Place

Signature, Name and designation of the issuing authority

Name, Designation & Signature of the Inspection Officer/s

- (i)
- (ii)