

**Government of India/State**

**Department of....**

**FORM-GST-RFD-07**

*[See Rule-----]*

**Show cause notice for reject of refund application**

Reference No. :

Date: <DD/MM/YYYY>

**To**

\_\_\_\_\_ (GSTIN)

\_\_\_\_\_ (Name)

\_\_\_\_\_ (Address)

Application Reference No. (ARN) .....

Dated .....<DD/MM/YYYY>.....

This is with reference to your Refund application referred above, filed under Section ---- of the Goods and Services Tax Act, 20--. On examination, following reasons for non-admissibility of refund application have been observed:

Sr No	Description (select the reasons of inadmissibility of refund from the drop down)	Amount Inadmissible
	Other{ <i>any other reason other than the reasons mentioned in 'reason master'</i> }	

You are hereby called upon to show cause as to why your refund claim should not be rejected for reasons stated above. You are requested to submit your response within <15> days, <Date> to the undersigned from the date of <receipt > of this notice. If you fail to file reply, it will be presumed that you have nothing to report and your application for refund claim stands rejected.

Date:

Signature (DSC):

Place:

Name:

Designation:

Office Address: