

**FORM GST ASMT – 17***[See rule 100(4)]***Application for withdrawal of assessment order issued under section 64**

|  |               |                        |
|--|---------------|------------------------|
| 1. GSTIN /ID   |               |                        |
| 2. Name  |               |                        |
| 3. Details of the order  | Reference No. | Date of issue of order |
| 4. Tax Period, if any  |               |                        |
| 5. Grounds for withdrawal  |               |                        |
|  |               |                        |
| <p>6. Verification-</p> <p>I _____ hereby solemnly affirm and declare that the information given hereinabove is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.</p> <p>Signature of Authorised Signatory</p> <p>Name _____</p> <p>Designation / Status -----</p> <p>Date -</p> |               |                        |