

FORM - XXI

Department of Commercial Taxes, Government of Uttar Pradesh

[See rule-40(1) of the UPVAT Rules, 2008]

Transport Memo

Sl. No.....

[Original copy-for transporter]

(To be filled in by the Commercial Tax Department)

TIN

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w.e.f.

d	d	m	m	y	y	y	y
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1- Seal of Issuing Officer -

2- Date of Issue -

(To be filled in by the consignor/selling dealer)

Name and Address of Consignor																			
Phone No., if any																			
TIN																			

w.e.f.

d	d	m	m	y	y	y	y
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Name and Address of Consignee of goods																			
Phone No., if any																			
TIN																			

w.e.f.

d	d	m	m	y	y	y	y
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Sl No.	Detail of goods received by transporter from the consignor	Punch here
1.	Number & Date of Tax Invoice / Sale Invoice / Bill / Cash Memo / Purchase Invoice / Transfer Challan-	1 <input type="radio"/>
2.	Name of goods	2 <input type="radio"/>
3.	No. of packets / bags / cases	3 <input type="radio"/>
4.	Weight / measurement	4 <input type="radio"/>
5.	Value of goods	5 <input type="radio"/>
6.	Punch the appropriate circle given on the side : (1) for value up to Rs. 50,000, (2) for goods of value from Rs 50,001 to 1,00,000, (3) for goods of value from Rs. 1,00,001 to 5,00,000, (4) for goods of value from Rs. 5,00,001 to 10,00,000 and (5) for goods of value aboveRs 10,00,000	

Date-

Place-.....

Signature of Consignor / Selling Dealer or
authorized representative

[To be filled in by the owner / Driver / Person in charge of Vehicle, if found unfilled goods will be seized]

Name and Address of Transporter, carrier or forwarding agent																			
Phone No. if any																			

Service Provider Number

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w.e.f.

d	d	m	m	y	y	y	y
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1- Goods receipt Time & date and Place

2- Vehicle No.

3- Private Marka written by Transport co on the packages / packets -.....

4- Place from where the goods were loaded-.....

5- Time and date of starting of journey by the vehicle-.....

Signature of Owner or authorized
representative of Transport co.

FORM - XXI

Department of Commercial Taxes, Government of Uttar Pradesh

[See rule-40(1) of the UPVAT Rules, 2008]

Transport Memo

Sl. No.....

[Counterfoil-to be retained by the consignor]

(To be filled in by the Commercial Tax Department)

TIN

w.e.f.

1- Seal of Issuing Officer -

2- Date of Issue -

(To be filled in by the consignor/selling dealer)

Name and Address of Consignor	<table border="1" style="width: 100%; height: 40px;"></table>
Phone No., if any	<table border="1" style="width: 100%; height: 20px;"></table>
TIN	<table border="1" style="width: 100%; height: 15px;"></table> w.e.f. <table border="1" style="display: inline-table; width: 100px; height: 15px; vertical-align: middle;"></table>

Name and Address of Consignee of goods	<table border="1" style="width: 100%; height: 40px;"></table>
Phone No., if any	<table border="1" style="width: 100%; height: 20px;"></table>
TIN	<table border="1" style="width: 100%; height: 15px;"></table> w.e.f. <table border="1" style="display: inline-table; width: 100px; height: 15px; vertical-align: middle;"></table>

Sl No.	Detail of goods received by transporter from the consignor	Punch here
7.	Number & Date of Tax Invoice / Sale Invoice / Bill / Cash Memo / Purchase Invoice / Transfer Challan-	<div>1 <input type="radio"/></div> <div>2 <input type="radio"/></div> <div>3 <input type="radio"/></div> <div>4 <input type="radio"/></div> <div>5 <input type="radio"/></div>
8.	Name of goods	
9.	No. of packets / bags / cases	
10.	Weight / measurement	
11.	Value of goods	
12.	Punch the appropriate circle given on the side : (1) for value up to Rs. 50,000, (2) for goods of value from Rs 50,001 to 1,00,000, (3) for goods of value from Rs. 1,00,001 to 5,00,000, (4) for goods of value from Rs. 5,00,001 to 10,00,000 and (5) for goods of value aboveRs 10,00,000	

Date-

Place-

Signature of Consignor / Selling Dealer or
authorized representative

[To be filled in by the owner / Driver / Person in charge of Vehicle, if found unfilled goods will be seized]

Name and Address of Transporter, carrier or forwarding agent	<table border="1" style="width: 100%; height: 40px;"></table>
Phone No., if any	<table border="1" style="width: 100%; height: 20px;"></table>

Service Provider Number

w.e.f.

- 1- Goods receipt Time & date and Place
- 2- Vehicle No.
- 3- Private Marka written by Transport co on the packages / packets -.....
- 4- Place from where the goods were loaded-
- 5- Time and date of starting of journey by the vehicle-

Signature of Owner or authorized
representative of Transport co.