|  |  |
| --- | --- |
|  | **Application for obtaining Periodic Permission of Imported** [**Capital Goods**](https://bengaluru.stpi.in/sites/default/files/inline-files/Annexure_0.docx) |
|  **Quarterly** |  **Half-Yearly** |  **Yearly** |
| **Unit Name :****Address of Registered/ Head Office:LoP No. date and validity:****Address of Unit’s Work Location:****Total approved CG Import Limit in Rs. Lakhs:****CG limit balance in Rs. Lakhs (Excluding this request):****List of the Items requested for the period: Quarter: \_\_\_\_\_\_\_\_\_\_\_\_/ Half Year:\_\_\_\_\_\_\_\_\_\_\_\_:/ Year:\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Please specify)** |
| **GSTIN No. Port of entry:** |
| **SL No.** | **Description of Capital Goods** | **CTH / HSN Code** | **Estimated Quantity** | **\*UOM** | **Unit Price (In Lakhs)** | **Total Assessable Value (In Lakhs)** | **Total Duty Foregone (In Lakhs)** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Total**  |  |  |  |  |  |

**(\*UOM: unit of measure like sq.mt/ feet/inch etc, if applicable)**

 **Date: Sign and Seal of Authorized Signatory**

**Name:**

 **Designation:**