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|  |  | **Reconciliation Sheet for goods to be destructed** | | | | | | | | | | | | | |  |
| **Details of Indigenous items to be destructed** | | | | | | | | | | | | | | | | |
| **(For STP/EHTP Units)** | | | | | | | | | | | | | | | | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Sl. No. | Indigenous approval Number | Indigenous approval Date | Quantity of Item approved & Procured | Description of items approved & procured | Indigenous approval amount in INR | Assessable value of Indigenous item as per ARE-3 | Quantity of Indigenous Item to be destructed | Assessable Value of Indigenous Item to be destructed (In Rs.) | Date of clearance | Quantity of item de-bonded, if any | Quantity of item shifted to other unit , if any | Balance of quantity after de-bond & shift to other unit | Description of Indigenous item to be destrcuted | Balance amount (Assessable Value) | ARE-3 No. | ARE-3 Date |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Total:- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Reason for de-bond** | | | | | | | | | | | | | | | | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Name and Signature of Director** | | | | | | | | **Name and Signature of Chartered Accountant** | | | | | | | | |
| **Unit name and address** | | | | | | |  | **Seal of Chartered Accountant** | | | | | | | | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  | Supporting self attested Indigenous approval copy  Note: -  Self attested certified Indigenous invoice copy  Self attested ARE-3/CT-3 copies | | | | | | | |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  | Self attested customs verified bond register copy. | | | |  |  |  |  |  |  |
| Company Seal | | | | |  |  |  |  |  |  |  |  |  |  |  |  |