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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:-  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **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 copySelf attested ARE-3/CT-3 copies |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  | Self attested customs verified bond register copy. |  |  |  |  |  |  |
| Company Seal |  |  |  |  |  |  |  |  |  |  |  |  |