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| From :   | Shifting Invoice No. & Date:  |
| LoP No. and Date: | 1. STP Indigenous Approval Ref. No. & Date
2. ARE-3/ CT-3 No. & Date

 (If there are multiple indigenous approval references, a separate annexure has to be enclosed.) |
| To: |
| Country of Origin of Goods: | Final Destination: |
| Vessel/Flight No.: | Port of Loading: | Port of Discharge: | Final Destination: |
| Pre- Carriage by  | Place of ReceiptBy Pre - Carrier | Terms of Delivery and PaymentNo commercial Transaction involved in this invoice. |
| Marks & Nos/ Model/ HSN | Description of Goods | Sl .No. | Qty to be shifted | Rate Per Unit | Amount in INR(As per ARE-3 form) |
|  |  |   |   |   |   |

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| Amount in Words: This Invoice is for Customs Valuation only. These Goods are being shifted temporarily/ Permanent for (mention reason for shifting). Declaration:We declare that this Invoice shows the actual price of the goods described and that all particulars are true and correct.  Signature & Seal of Authorized Signatory  |