

FORMS - FT

{ See Rules 56 (2) }

I, _____ resident
(temporarily) at _____ (permanently) at _____
_____ hereby declare that I have brought the
undermentioned motor vehicle into the union Territory of Daman & Diu _____
and that I intend to keep it in the Union Territory up to _____ for use
solely within the limits of the local authority viz. _____
(here mention the name of local authority) _____

_____ which has levied at tax on the motor vehicle/both
within the limits of the local authority viz. _____ (here mention the name of
the local authority) _____ and outside
these limits : -

- (1) Class of motor Vehicle : _____
- (2) Registration mark : _____
- (3) Maker's Name : _____
- (4) Type of Body : _____
- (5) Type of Chasis : _____
- (6) Type of Engine : _____
- (7) Unladen weight : _____
- (8) Whether use for carriage of persons or goods : _____
- (9) If used for carriage of persons : _____
- (a) Whether playing for hire : _____
- (b) Carrying Capacity : _____
- (i) Stated (including driver) : _____
- (ii) Standees : _____
- Total _____
- (10) If used for carriage of goods : _____
- (a) Whether a private goods vehicle or a public goods vehicle : _____
- (b) Registered laden weight : _____
- (c) Carrying capacity i.e. the difference between the registered laden weight and the unladen weight : _____
- (11) (a) Date on which the motor vehicle was last brought into the State of Maharashtra : _____
- (b) Date on which it was last removed from the State of _____

- (12) The fuel used in vehicle : _____
- (13) Name of Insurer : _____
- (14) Insurance Certificate No. : _____
- (15) Date of validity of Insurance Certificate : _____

From _____ to _____

I tender herewith Rs. _____ by Cash/Cheque/Demand Draft/Money Order/Treasury Chalan being the tax due in respect of the vehicle described above.

The said vehicle is exempted from payment of tax by Government Notification, Home Department, No. _____ dated the _____ for the period in the state of _____ for the period ending _____ by virtue of having paid the tax for the said period in the State of _____.

Dated the _____

Signature of the Declarant.

_____ Total