

**Government of India/State**

**Department of -----**

**Form GST REG-26**

*[See Rule -----]*

**Form for Field Visit Report**

**Centre/State Jurisdiction (Ward/Circle/Zone)**

**Name of the Officer: - << to be prefilled>>**

**Date of Submission of Report: -**

**Name of the Taxpayer**

**GSTIN/Unique ID Number –**

**Task Assigned by: - < Name of the Authority- to be prefilled>**

**Date and Time of Assignment of task: - < System date and time>**

<b>S. No.</b>	<b>Particulars</b>	<b>Input</b>
1.	<b>Date of Visit</b>	
2.	<b>Time of Visit</b>	
3.	<b>Location details</b>	
	Latitude	
	Longitude	
	North – Bounded By	
	South – Bounded By	
	West – Bounded By	
	East – Bounded By	
4.	<b>Whether address is same as mentioned in application.</b>	Y / N
5.	<b>Particulars of the Persons available at the time of Visit</b>	
(i)	Name	
(ii)	Father Name	
(iii)	Residential Address	
(iv)	Mobile Number	
(v)	Designation / Status	
(vi)	Relationship with taxpayer, if applicable.	
6.	Functioning status of the Business	Functioning - Y / N
7.	Details of the premises	
	Open Space Area (in sq m.) - (approx.)	

	Covered Space Area (in sq. m.) - (approx.)	
	Floor on which business premises located	
8.	<b>Documents verified</b>	Yes/No
9.	Upload photograph of the place with the person who is present at the place where site verification is conducted.	
10.	<b>Comments</b> (not more than < 1000 characters>	
	Signature	
	Name of the Officer	
	Designation	
	Jurisdiction	