Office of the Revenue Appellate Tribunal Review/Revision No. () 20____

Name					
NRC No	Applicant				
Address					
Name and address of of the department where the order is issued					
	Vs.				
				Respondent	
		on the applicant and respondent. (Or) The			
	(The address mentioned above is to s		summon the ap		
address may be submitted through a separate application.) Filing a memorandum of review/revision					
			Grounds of appeal for exceeding limitation	on period	
			1. To submit the case only that exce	eds the limitatio	n period
					 .
			Grounds of appeal		
1					
2					
(Signature)		(Signature)			
Name of the applicant's attorney	(or)	Name of the applicant			
or representative					
NRC No. (or) if attorney, License No.		NRC No.			
Address in full		Address in full			
Date of filing the case					
List of documents along with the applica	ation				