

**DECLARATION FOR GOODS TRANSPORTED INTO THE
STATE OF TELANGANA**

(Other than those covered under Form – 615 –Transit Pass)
(See Rule 55(8))

FORM NO.650

**NAME & ADDRESS OF
THE TRANSPORTER
VEHICLE NO.
NAME OF THE ENTRY CHECK POST**

**NAME AND ADDRESS OF
DRIVER
DRIVER LICENCE NO.**

SI. No	L.R.No. Document No. & Date	Name and Full Address of Consignor with TIN Registration No.	Name and Full Address of Consignee	TIN of Consignee	Invoice No.& Date	Description of goods	Quantity	[Total value of goods set out in the invoice/sale bill/ delivery note]

Date

Signature of the person responsible

Note: The bracked words were substituted by G.O.Ms.No.33 Rev. dt.21.1.2013 w.e.f.21.1.2013