

**APPENDIX 30**

**ADVANCE RELEASE ORDER (ARO) / INVALIDATION LETTER FORMAT**

GOVERNMENT OF INDIA  
MINISTRY OF COMMERCE & INDUSTRY  
DEPARTMENT OF COMMERCE

Office of the

File No

Date

Advance Release Order / Invalidation letter\*\* No

Date

1. Name and address of the applicant
2. Authorisation no.  
Date
3. Name and address of the Indigenous Producer / STE\*
4. Items to be supplied by Indigenous producer / STE\*

S.No.	Items to be procured	Qty (in figures and words)	Value (in figures and words)
1.			
2.			
3.			
4.			

5. Regional Authority of the Indigenous Producer / STE\*

- Note:
- a) This Advance Release Order / Invalidation letter\*\* shall be produced in original to above-mentioned indigenous producer / STE\* for supply of goods as per above details.
  - b) This Release Order / Invalidation letter will be valid upto -----.
  - c) The material received by the holder of this Release Order/ Invalidation letter\*\* shall be subject to the same conditions as applicable to the authorisations issued under Advance authorisation / DFIA against which this Advance Release Order / Invalidation letter\*\* has been issued.
  - d) Both quantity and value shall be limiting factor.

Yours faithfully,

Asstt. Director General of Foreign Trade/  
Foreign Trade Development Officer

Security Seal

Endt.No..... Dated .....

- (i) Jt./ Dy. Director General of Foreign Trade ..... ( Name and address of the Regional Authority of indigenous producer / STE\* ).
- (ii) M/s. .... (Name and address of the indigenous producer / STE\* ) for necessary action.

Asstt. Director General of Foreign Trade/  
Foreign Trade Development Officer

Details of materials supplied under above Advance Release Order / Invalidation letter\*\*

Sn. No.	Description of goods	Quantity supplied		Value of goods	
		In figures	In words	In figures	In words
1.					
2.					
3.					

We confirm having supplied the goods as per details above.

Signature  
( Name and address of indigenous producer/ STE\* )

We confirm having received the goods as per details above.

Signature  
(Name and address of the Advance Release Order / Invalidation letter\*\* holder)

**Note:**

\* Strike out whichever is not applicable.

\*\*Strike out whichever is not applicable.