### **NOTIFICATION** FINANCE DEPARTMENT Sachivalaya, Gandhinagar.

Dated the 21st June, 2017.

Gujarat Services Tax Act, 2017

No. (GHN-26)/GSTR-2017 (1).TH- In exercise of the powers conferred by section 164 Goods and of the Gujarat Goods and Services Tax Act, 2017 (25 of 2017), the Government of Gujarat hereby makes the following rules, namely:-

#### Chapter I

#### **PRELIMINARY**

- **1. Short title, Extent and Commencement.**-(1) These rules may be called the Gujarat Goods and Services Tax Rules, 2017.
  - (2) They shall come into force with effect from 22<sup>nd</sup> June, 2017.
- **2. Definitions.-** In these rules, unless the context otherwise requires,-
  - "Act" means the Gujarat Goods and Services Tax Act, 2017 (Guj. 25 of 2017); (a)
  - (b) "FORM" means a Form appended to these rules;
  - (c) "section" means a section of the Act;
  - (d) "Special Economic Zone" shall have the same meaning as assigned to it in clause (za) of section 2 of the Special Economic Zones Act, 2004 (11 of 2005):
  - (e) words and expressions used herein but not defined and defined in the Act shall have the meanings respectively assigned to them in the Act.

#### Chapter II

#### COMPOSITION RULES

**3. Intimation for composition levy.-** (1) Any person who has been granted registration on a provisional basis under clause (b) of sub-rule (1) of rule 24 and who opts to pay tax under section 10, shall electronically file an intimation in FORM GST CMP-01, duly signed or verified through electronic verification code, on the common portal, either directly or through a Facilitation Centre notified by the Commissioner, prior to the appointed day, but not later than thirty days after the said day, or such further period as may be extended by the Commissioner in this behalf:

Provided that where the intimation in FORM GST CMP-01 is filed after the appointed day, the registered person shall not collect any tax from the appointed day but shall issue bill of supply for supplies made after the said day.

- (2) Any person who applies for registration under sub-rule (1) of rule 8 may give an option to pay tax under section 10 in Part B of FORM GST REG-01, which shall be considered as an intimation to pay tax under the said section.
- (3) Any registered person who opts to pay tax under section 10 shall electronically file an intimation in FORM GST CMP-02, duly signed or verified through electronic verification code, on the common portal, either directly or through a Facilitation Centre notified by the

Commissioner, prior to the commencement of the financial year for which the option to pay tax under the aforesaid section is exercised and shall furnish the statement in **FORM GST ITC-03** in accordance with the provisions of sub-rule (4) of rule 44 within a period of sixty days from the commencement of the relevant financial year.

- (4) Any person who files an intimation under sub-rule (1) to pay tax under section 10 shall furnish the details of stock, including the inward supply of goods received from unregistered persons, held by him on the day preceding the date from which he opts to pay tax under the said section, electronically, in **FORM GST CMP-03**, on the common portal, either directly or through a Facilitation Centre notified by the Commissioner, within a period of sixty days from the date on which the option for composition levy is exercised or within such further period as may be extended by the Commissioner in this behalf.
- (5) Any intimation under sub-rule (1) or sub-rule (3) in respect of any place of business in any State or Union territory shall be deemed to be an intimation in respect of all other places of business registered on the same Permanent Account Number.
- **4. Effective date for composition levy.-** (1) The option to pay tax under section 10 shall be effective from the beginning of the financial year, where the intimation is filed under sub-rule (3) of rule 3 and the appointed day where the intimation is filed under sub-rule (1) of the said rule.
- (2) The intimation under sub-rule (2) of rule 3, shall be considered only after the grant of registration to the applicant and his option to pay tax under section 10 shall be effective from the date fixed under sub-rule (2) or (3) of rule 10.
- **5.** Conditions and restrictions for composition levy.- (1) The person exercising the option to pay tax under section 10 shall comply with the following conditions, namely:-
  - (a) he is neither a casual taxable person nor a non-resident taxable person;
  - (b) the goods held in stock by him on the appointed day have not been purchased in the course of inter-State trade or commerce or imported from a place outside India or received from his branch situated outside the State or from his agent or principal outside the State, where the option is exercised under sub-rule (1) of rule 3;
  - (c) the goods held in stock by him have not been purchased from an unregistered supplier and where purchased, he pays the tax under sub-section (4) of section 9;
  - (d) he shall pay tax under sub-section (3) or sub-section (4) of section 9 on inward supply of goods or services or both;
  - (e) he was not engaged in the manufacture of goods as notified under clause (e) of sub-section (2) of section 10, during the preceding financial year;
  - (f) he shall mention the words "composition taxable person, not eligible to collect tax on supplies" at the top of the bill of supply issued by him; and
  - (g) he shall mention the words "composition taxable person" on every notice or signboard displayed at a prominent place at his principal place of business and at every additional place or places of business.
- (2) The registered person paying tax under section 10 may not file a fresh intimation every year and he may continue to pay tax under the said section subject to the provisions of the Act and these rules.

- **6. Validity of composition levy.-** (1) The option exercised by a registered person to pay tax under section 10 shall remain valid so long as he satisfies all the conditions mentioned in the said section and under these rules.
  - (2) The person referred to in sub-rule (1) shall be liable to pay tax under sub-section (1) of section 9 from the day he ceases to satisfy any of the conditions mentioned in section 10 or the provisions of this Chapter and shall issue tax invoice for every taxable supply made thereafter and he shall also file an intimation for withdrawal from the scheme in **FORM GST CMP-04** within seven days of the occurrence of such event.
  - (3) The registered person who intends to withdraw from the composition scheme shall, before the date of such withdrawal, file an application in **FORM GST CMP-04**, duly signed or verified through electronic verification code, electronically on the common portal.
  - (4) Where the proper officer has reasons to believe that the registered person was not eligible to pay tax under section 10 or has contravened the provisions of the Act or provisions of this Chapter, he may issue a notice to such person in **FORM GST CMP-05** to show cause within fifteen days of the receipt of such notice as to why the option to pay tax under section 10 shall not be denied.
  - (5) Upon receipt of the reply to the show cause notice issued under sub-rule (4) from the registered person in **FORM GST CMP-06**, the proper officer shall issue an order in **FORM GST CMP-07** within a period of thirty days of the receipt of such reply, either accepting the reply, or denying the option to pay tax under section 10 from the date of the option or from the date of the event concerning such contravention, as the case may be.
  - (6) Every person who has furnished an intimation under sub-rule (2) or filed an application for withdrawal under sub-rule (3) or a person in respect of whom an order of withdrawal of option has been passed in **FORM GST CMP-07** under sub-rule (5), may electronically furnish at the common portal, either directly or through a Facilitation Centre notified by the Commissioner, a statement in **FORM GST ITC-01** containing details of the stock of inputs and inputs contained in semi-finished or finished goods held in stock by him on the date on which the option is withdrawn or denied, within a period of thirty days from the date from which the option is withdrawn or from the date of the order passed in **FORM GST CMP-07**, as the case may be.
  - (7) Any intimation or application for withdrawal under sub-rule (2) or (3) or denial of the option to pay tax under section 10 in accordance with sub-rule (5) in respect of any place of business in any State or Union territory, shall be deemed to be an intimation in respect of all other places of business registered on the same Permanent Account Number.
  - **7. Rate of tax of the composition levy.-** The category of registered persons, eligible for composition levy under section 10 and the provisions of this Chapter, specified in column (2) of the Table below shall pay tax under section 10 at the rate specified in column (3) of the said Table:-

Sl.	Category of registered persons	Rate of tax
No.		
(1)	(2)	(3)
1	Manufacturers, other than manufacturers of such	one per cent.

	goods as may be notified by the Government	
2	Suppliers making supplies referred to in clause (b) of paragraph 6 of Schedule II	two and a half per cent.
3	Any other supplier eligible for composition levy under section 10 and the provisions of this Chapter	half per cent.

### Chapter III REGISTRATION

**8.** Application for registration.-(1) Every person, other than a non-resident taxable person, a person required to deduct tax at source under section 51, a person required to collect tax at source under section 52 and a person supplying online information and database access or retrieval services from a place outside India to a non-taxable online recipient referred to in section 14 of the Integrated Goods and Services Tax Act, 2017 (13 of 2017) who is liable to be registered under sub-section (1) of section 25 and every person seeking registration under sub-section (3) of section 25 (hereafter in this Chapter referred to as "the applicant") shall, before applying for registration, declare his Permanent Account Number, mobile number, email address, State or Union territory in **Part A** of **FORM GST REG-01** on the common portal, either directly or through a Facilitation Centre notified by the Commissioner:

Provided that a person having a unit(s) in a Special Economic Zone or being a Special Economic Zone developer shall make a separate application for registration as a business vertical distinct from his other units located outside the Special Economic Zone:

Provided further that every person being an Input Service Distributor shall make a separate application for registration as such Input Service Distributor.

- (2) (a) The Permanent Account Number shall be validated online by the common portal from the database maintained by the Central Board of Direct Taxes.
  - (b) The mobile number declared under sub-rule (1) shall be verified through a one-time password sent to the said mobile number; and
  - (c) The e-mail address declared under sub-rule (1) shall be verified through a separate one-time password sent to the said e-mail address.
- (3) On successful verification of the Permanent Account Number, mobile number and email address, a temporary reference number shall be generated and communicated to the applicant on the said mobile number and e-mail address.
- (4) Using the reference number generated under sub-rule (3), the applicant shall electronically submit an application in **Part B** of **FORM GST REG-01**, duly signed or verified through electronic verification code, along with the documents specified in the said Form at the common portal, either directly or through a Facilitation Centre notified by the Commissioner.
- (5) On receipt of an application under sub-rule (4), an acknowledgement shall be issued electronically to the applicant in **FORM GST REG-02**.
- (6) A person applying for registration as a casual taxable person shall be given a temporary reference number by the common portal for making advance deposit of tax in accordance with the provisions of section 27 and the acknowledgement under sub-rule (5) shall be issued electronically only after the said deposit.

- **9. Verification of the application and approval.-**(1) The application shall be forwarded to the proper officer who shall examine the application and the accompanying documents and if the same are found to be in order, approve the grant of registration to the applicant within a period of three working days from the date of submission of the application.
- (2) Where the application submitted under rule 8 is found to be deficient, either in terms of any information or any document required to be furnished under the said rule, or where the proper officer requires any clarification with regard to any information provided in the application or documents furnished therewith, he may issue a notice to the applicant electronically in **FORM GST REG-03** within a period of three working days from the date of submission of the application and the applicant shall furnish such clarification, information or documents electronically, in **FORM GST REG-04**, within a period of seven working days from the date of the receipt of such notice.

Explanation.- For the purposes of this sub-rule, the expression "clarification" includes modification or correction of particulars declared in the application for registration, other than Permanent Account Number, State, mobile number and e-mail address declared in **Part A** of **FORM GST REG-01**.

- (3) Where the proper officer is satisfied with the clarification, information or documents furnished by the applicant, he may approve the grant of registration to the applicant within a period of seven working days from the date of the receipt of such clarification or information or documents.
- (4) Where no reply is furnished by the applicant in response to the notice issued under sub-rule (2) or where the proper officer is not satisfied with the clarification, information or documents furnished, he shall, for reasons to be recorded in writing, reject such application and inform the applicant electronically in **FORM GST REG-05.**
- (5) If the proper officer fails to take any action, -
  - (a) within a period of three working days from the date of submission of the application; or
  - (b) within a period of seven working days from the date of the receipt of the clarification, information or documents furnished by the applicant under sub-rule (2),

the application for grant of registration shall be deemed to have been approved.

- **10. Issue of registration certificate.-** (1) Subject to the provisions of sub-section (12) of section 25, where the application for grant of registration has been approved under rule 9, a certificate of registration in **FORM GST REG-06** showing the principal place of business and additional place or places of business shall be made available to the applicant on the common portal and a Goods and Services Tax Identification Number shall be assigned subject to the following characters, namely:-
  - (a) two characters for the State code;
  - (b)ten characters for the Permanent Account Number or the Tax Deduction and Collection Account Number;
  - (c) two characters for the entity code; and
  - (d) one checksum character.
- (2) The registration shall be effective from the date on which the person becomes liable to registration where the application for registration has been submitted within a period of thirty days from such date.

- (3) Where an application for registration has been submitted by the applicant after the expiry of thirty days from the date of his becoming liable to registration, the effective date of registration shall be the date of the grant of registration under sub-rule (1) or sub-rule (3) or sub-rule (5) of rule 9.
- (4) Every certificate of registration shall be digitally signed by the proper officer under the Act.
- (5) Where the registration has been granted under sub-rule (5) of rule 9, the applicant shall be communicated the registration number, and the certificate of registration under sub-rule (1), duly signed or verified through electronic verification code, shall be made available to him on the common portal, within a period of three days after the expiry of the period specified in sub-rule (5) of rule 9.
- 11. Separate registration for multiple business verticals within a State or a Union territory.- (1) Any person having multiple business verticals within a State or a Union territory, requiring a separate registration for any of its business verticals under sub-section (2) of section 25 shall be granted separate registration in respect of each of the verticals subject to the following conditions, namely:-
  - (a) such person has more than one business vertical as defined in clause (18) of section 2;
  - (b) the business vertical of a taxable person shall not be granted registration to pay tax under section 10 if any one of the other business verticals of the same person is paying tax under section 9;
  - (c) all separately registered business verticals of such person shall pay tax under the Act on supply of goods or services or both made to another registered business vertical of such person and issue a tax invoice for such supply.

*Explanation.*- For the purposes of clause (b), it is hereby clarified that where any business vertical of a registered person that has been granted a separate registration becomes ineligible to pay tax under section 10, all other business verticals of the said person shall become ineligible to pay tax under the said section.

- (2) A registered person eligible to obtain separate registration for business verticals may submit a separate application in **FORM GST REG-01** in respect of each such vertical.
- (3) The provisions of rule 9 and rule 10 relating to the verification and the grant of registration shall, *mutatis mutandis*, apply to an application submitted under this rule.
- **12. Grant of registration to persons required to deduct tax at source or to collect tax at source.** (1) Any person required to deduct tax in accordance with the provisions of section 51 or a person required to collect tax at source in accordance with the provisions of section 52 shall electronically submit an application, duly signed or verified through electronic verification code, in **FORM GST REG-07** for the grant of registration through the common portal, either directly or through a Facilitation Centre notified by the Commissioner.
- (2) The proper officer may grant registration after due verification and issue a certificate of registration in **FORM GST REG-06** within a period of three working days from the date of submission of the application.
- (3) Where, upon an enquiry or pursuant to any other proceeding under the Act, the proper officer is satisfied that a person to whom a certificate of registration in **FORM GST REG-06**

has been issued is no longer liable to deduct tax at source under section 51 or collect tax at source under section 52, the said officer may cancel the registration issued under sub-rule (2) and such cancellation shall be communicated to the said person electronically in **FORM GST REG-08:** 

Provided that the proper officer shall follow the procedure as provided in rule 22 for the cancellation of registration.

**13. Grant of registration to non-resident taxable person.-** (1) A non-resident taxable person shall electronically submit an application, along with a self-attested copy of his valid passport, for registration, duly signed or verified through electronic verification code, in **FORM GST REG-09**, at least five days prior to the commencement of business at the common portal either directly or through a Facilitation Centre notified by the Commissioner:

Provided that in the case of a business entity incorporated or established outside India, the application for registration shall be submitted along with its tax identification number or unique number on the basis of which the entity is identified by the Government of that country or its Permanent Account Number, if available.

- (2) A person applying for registration as a non-resident taxable person shall be given a temporary reference number by the common portal for making an advance deposit of tax in accordance with the provisions of section 27 and the acknowledgement under sub-rule (5) of rule 8 shall be issued electronically only after the said deposit in his electronic cash ledger.
- (3) The provisions of rule 9 and rule 10 relating to the verification and the grant of registration shall, *mutatis mutandis*, apply to an application submitted under this rule.
- (4) The application for registration made by a non-resident taxable person shall be signed by his authorised signatory who shall be a person resident in India having a valid Permanent Account Number.
- **14.** Grant of registration to a person supplying online information and database access or retrieval services from a place outside India to a non-taxable online recipient.-(1)Any person supplying online information and database access or retrieval services from a place outside India to a non-taxable online recipient shall electronically submit an application for registration, duly signed or verified through electronic verification code, in **FORM GST REG-10**, at the common portal, either directly or through a Facilitation Centre notified by the Commissioner.
- (2) The applicant referred to in sub-rule (1) shall be granted registration, in **FORM GST REG-06**, subject to such conditions and restrictions and by such officer as may be notified by the State Government on the recommendations of the Council.
- **15.** Extension in period of operation by casual taxable person and non-resident taxable person. (1) Where a registered casual taxable person or a non-resident taxable person intends to extend the period of registration indicated in his application of registration, an application in **FORM GST REG-11** shall be submitted electronically through the common portal, either directly or through a Facilitation Centre notified by the Commissioner, by such person before the end of the validity of registration granted to him.
- (2) The application under sub-rule (1) shall be acknowledged only on payment of the amount specified in sub-section (2) of section 27.

- **16.** Suo moto registration.- (1) Where, pursuant to any survey, enquiry, inspection, search or any other proceedings under the Act, the proper officer finds that a person liable to registration under the Act has failed to apply for such registration, such officer may register the said person on a temporary basis and issue an order in **FORM GST REG-12**.
- (2) The registration granted under sub-rule (1) shall be effective from the date of such order granting registration.
- (3) Every person to whom a temporary registration has been granted under sub-rule (1) shall, within a period of ninety days from the date of the grant of such registration, submit an application for registration in the form and manner provided in rule 8 or rule 12:

Provided that where the said person has filed an appeal against the grant of temporary registration, in such case, the application for registration shall be submitted within a period of thirty days from the date of the issuance of the order upholding the liability to registration by the Appellate Authority.

- (4) The provisions of rule 9 and rule 10 relating to verification and the issue of the certificate of registration shall, *mutatis mutandis*, apply to an application submitted under sub-rule (3).
- (5) The Goods and Services Tax Identification Number assigned, pursuant to the verification under sub-rule (4), shall be effective from the date of the order granting registration under sub-rule (1).
- **17. Assignment of Unique Identity Number to certain special entities.-** (1) Every person required to be granted a Unique Identity Number in accordance with the provisions of subsection (9) of section 25 may submit an application electronically in **FORM GST REG-13**, duly signed or verified through electronic verification code, in the manner specified in rule 8 at the common portal, either directly or through a Facilitation Centre notified by the Commissioner.
- (2) The proper officer may, upon submission of an application in **FORM GST REG-13** or after filling up the said form, assign a Unique Identity Number to the said person and issue a certificate in **FORM GST REG-06** within a period of three working days from the date of the submission of the application.
- **18.** Display of registration certificate and Goods and Services Tax Identification Number on the name board.- (1) Every registered person shall display his certificate of registration in a prominent location at his principal place of business and at every additional place or places of business.
- (2) Every registered person shall display his Goods and Services Tax Identification Number on the name board exhibited at the entry of his principal place of business and at every additional place or places of business.

19. Amendment of registration.- (1) Where there is any change in any of the particulars furnished in the application for registration in FORM GST REG-01 or FORM GST REG-07 or FORM GST REG-09 or FORM GST REG-10 or for Unique Identity Number in FORM GST-REG-13, either at the time of obtaining registration or Unique Identity Number or as amended from time to time, the registered person shall, within a period of fifteen days of such change, submit an application, duly signed or verified through electronic verification code, electronically in FORM GST REG-14, along with the documents relating to such change at the common portal, either directly or through a Facilitation Centre notified by the Commissioner:

Provided that - (a) where the change relates to,-

- (i) legal name of business;
- (ii) address of the principal place of business or any additional place(s) of business; or
- (iii) addition, deletion or retirement of partners or directors, Karta, Managing Committee, Board of Trustees, Chief Executive Officer or equivalent, responsible for the day to day affairs of the business,-

which does not warrant cancellation of registration under section 29, the proper officer shall, after due verification, approve the amendment within a period of fifteen working days from the date of the receipt of the application in **FORM GST REG-14** and issue an order in **FORM GST REG-15** electronically and such amendment shall take effect from the date of the occurrence of the event warranting such amendment;

- (b) the change relating to sub-clause (i) and sub-clause (iii) of clause (a) in any State or Union territory shall be applicable for all registrations of the registered person obtained under the provisions of this Chapter on the same Permanent Account Number:
- (c) where the change relates to any particulars other than those specified in clause (a), the certificate of registration shall stand amended upon submission of the application in **FORM GST REG- 14** on the common portal;
- (d) where a change in the constitution of any business results in the change of the Permanent Account Number of a registered person, the said person shall apply for fresh registration in **FORM GST REG-01**:

Provided further that any change in the mobile number or e-mail address of the authorised signatory submitted under this rule, as amended from time to time, shall be carried out only after online verification through the common portal in the manner provided under the said rule.

- (2) Where the proper officer is of the opinion that the amendment sought under sub-rule (1) is either not warranted or the documents furnished therewith are incomplete or incorrect, he may, within a period of fifteen working days from the date of the receipt of the application in **FORM GST REG-14**, serve a notice in **FORM GST REG-03**, requiring the registered person to show cause, within a period of seven working days of the service of the said notice, as to why the application submitted under sub-rule (1) shall not be rejected.
- (3) The registered person shall furnish a reply to the notice to show cause, issued under subrule (2), in **FORM GST REG-04**, within a period of seven working days from the date of the service of the said notice.

- (4) Where the reply furnished under sub-rule (3) is found to be not satisfactory or where no reply is furnished in response to the notice issued under sub-rule (2) within the period prescribed in sub-rule (3), the proper officer shall reject the application submitted under sub-rule (1) and pass an order in **FORM GST REG -05**.
- (5) If the proper officer fails to take any action,-
  - (a) within a period of fifteen working days from the date of submission of the application, or
  - (b) within a period of seven working days from the date of the receipt of the reply to the notice to show cause under sub-rule (3),

the certificate of registration shall stand amended to the extent applied for and the amended certificate shall be made available to the registered person on the common portal.

**20. Application for cancellation of registration.-** A registered person, other than a person to whom a registration has been granted under rule 12 or a person to whom a Unique Identity Number has been granted under rule 17, seeking cancellation of his registration under subsection (1) of section 29 shall electronically submit an application in **FORM GST REG-16,** including therein the details of inputs held in stock or inputs contained in semi-finished or finished goods held in stock and of capital goods held in stock on the date from which the cancellation of registration is sought, liability thereon, the details of the payment, if any, made against such liability and may furnish, along with the application, relevant documents in support thereof, at the common portal within a period of thirty days of the occurrence of the event warranting the cancellation, either directly or through a Facilitation Centre notified by the Commissioner:

Provided that no application for the cancellation of registration shall be considered in case of a taxable person, who has registered voluntarily, before the expiry of a period of one year from the effective date of registration.

- **21. Registration to be cancelled in certain cases.-** The registration granted to a person is liable to be cancelled, if the said person,-
  - (a) does not conduct any business from the declared place of business; or
  - (b) issues invoice or bill without supply of goods or services in violation of the provisions of this Act, or the rules made thereunder.
- **22. Cancellation of registration.-** (1) Where the proper officer has reasons to believe that the registration of a person is liable to be cancelled under section 29, he shall issue a notice to such person in **FORM GST REG-17**, requiring him to show cause, within a period of seven working days from the date of the service of such notice, as to why his registration shall not be cancelled.
- (2) The reply to the show cause notice issued under sub-rule (1) shall be furnished in **FORM REG–18** within the period specified in the said sub-rule.
- (3) Where a person who has submitted an application for cancellation of his registration is no longer liable to be registered or his registration is liable to be cancelled, the proper officer shall issue an order in **FORM GST REG-19**, within a period of thirty days from the date of application submitted under sub-rule (1) of rule 20 or, as the case may be, the date of the reply to the show cause issued under sub-rule (1), cancel the registration, with effect from a date to be determined by him and notify the taxable person, directing him to pay arrears of

any tax, interest or penalty including the amount liable to be paid under sub-section (5) of section 29.

- (4) Where the reply furnished under sub-rule (2) is found to be satisfactory, the proper officer shall drop the proceedings and pass an order in **FORM GST REG –20**.
- (5) The provisions of sub-rule (3) shall, *mutatis mutandis*, apply to the legal heirs of a deceased proprietor, as if the application had been submitted by the proprietor himself.
- **23. Revocation of cancellation of registration.-** (1) A registered person, whose registration is cancelled by the proper officer on his own motion, may submit an application for revocation of cancellation of registration, in **FORM GST REG-21**, to such proper officer, within a period of thirty days from the date of the service of the order of cancellation of registration at the common portal, either directly or through a Facilitation Centre notified by the Commissioner:

Provided that no application for revocation shall be filed, if the registration has been cancelled for the failure of the registered person to furnish returns, unless such returns are furnished and any amount due as tax, in terms of such returns, has been paid along with any amount payable towards interest, penalty and late fee in respect of the said returns.

- (2) (a) Where the proper officer is satisfied, for reasons to be recorded in writing, that there are sufficient grounds for revocation of cancellation of registration, he shall revoke the cancellation of registration by an order in **FORM GST REG-22** within a period of thirty days from the date of the receipt of the application and communicate the same to the applicant.
- (b) The proper officer may, for reasons to be recorded in writing, under circumstances other than those specified in clause (a), by an order in **FORM GST REG-05**, reject the application for revocation of cancellation of registration and communicate the same to the applicant.
- (3) The proper officer shall, before passing the order referred to in clause (b) of sub-rule (2), issue a notice in **FORM GST REG-23** requiring the applicant to show cause as to why the application submitted for revocation under sub-rule (1) should not be rejected and the applicant shall furnish the reply within a period of seven working days from the date of the service of the notice in **FORM GST REG-24**.
- (4) Upon receipt of the information or clarification in **FORM GST REG-24**, the proper officer shall proceed to dispose of the application in the manner specified in sub-rule (2) within a period of thirty days from the date of the receipt of such information or clarification from the applicant.
- **24. Migration of persons registered under the existing law.-** (1) (a) Every person, other than a person deducting tax at source or an Input Service Distributor, registered under an existing law and having a Permanent Account Number issued under the provisions of the Income-tax Act, 1961 (Act 43 of 1961) shall enrol on the common portal by validating his email address and mobile number, either directly or through a Facilitation Centre notified by the Commissioner.
- (b) Upon enrolment under clause (a), the said person shall be granted registration on a provisional basis and a certificate of registration in **FORM GST REG-25**, incorporating the Goods and Services Tax Identification Number therein, shall be made available to him on the common portal:

Provided that a taxable person who has been granted multiple registrations under the existing law on the basis of a single Permanent Account Number shall be granted only one provisional registration under the Act:

Provided further that a person having centralised registration under the provisions of Chapter V of the Finance Act, 1994 (32 of 1994) shall be granted only one provisional registration in the State or Union territory in which he is registered under the existing law.

- (2)(a) Every person who has been granted a provisional registration under sub-rule (1) shall submit an application electronically in **FORM GST REG–26**, duly signed or verified through electronic verification code, along with the information and documents specified in the said application, on the common portal either directly or through a Facilitation Centre notified by the Commissioner.
- (b) The information asked for in clause (a) shall be furnished within a period of three months or within such further period as may be extended by the Commissioner in this behalf.
- (c) If the information and the particulars furnished in the application are found, by the proper officer, to be correct and complete, a certificate of registration in **FORM GST REG-06** shall be made available to the registered person electronically on the common portal.
- (3) Where the particulars or information specified in sub-rule (2) have either not been furnished or not found to be correct or complete, the proper officer shall, after serving a notice to show cause in **FORM GST REG-27** and after affording the person concerned a reasonable opportunity of being heard, cancel the provisional registration granted under sub-rule (1) and issue an order in **FORM GST REG-28**:

Provided that the show cause notice issued in **FORM GST REG- 27** can be withdrawn by issuing an order in **FORM GST REG- 20**, if it is found, after affording the person an opportunity of being heard, that no such cause exists for which the notice was issued.

- (4) Every person registered under any of the existing laws, who is not liable to be registered under the Act may, within a period of thirty days from the appointed day, at his option, submit an application electronically in **FORM GST REG-29** at the common portal for the cancellation of registration granted to him and the proper officer shall, after conducting such enquiry as deemed fit, cancel the said registration.
- 25. Physical verification of business premises in certain cases.- Where the proper officer is satisfied that the physical verification of the place of business of a registered person is required after the grant of registration, he may get such verification done and the verification report along with the other documents, including photographs, shall be uploaded in FORM GST REG-30 on the common portal within a period of fifteen working days following the date of such verification.

**26. Method of authentication.-** (1) All applications, including reply, if any, to the notices, returns including the details of outward and inward supplies, appeals or any other document required to be submitted under the provisions of these rules shall be so submitted electronically with digital signature certificate or through e-signature as specified under the provisions of the Information Technology Act, 2000 (21 of 2000) or verified by any other mode of signature or verification as notified by the Commissioner in this behalf:

Provided that a registered person registered under the provisions of the Companies Act, 2013 (18 of 2013) shall furnish the documents or application verified through digital signature certificate.

- (2) Each document including the return furnished online shall be signed or verified through electronic verification code-
  - (a) in the case of an individual, by the individual himself or where he is absent from India, by some other person duly authorised by him in this behalf, and where the individual is mentally incapacitated from attending to his affairs, by his guardian or by any other person competent to act on his behalf;
  - (b) in the case of a Hindu Undivided Family, by a Karta and where the Karta is absent from India or is mentally incapacitated from attending to his affairs, by any other adult member of such family or by the authorised signatory of such Karta;
  - (c) in the case of a company, by the chief executive officer or authorised signatory thereof;
  - (d) in the case of a Government or any Governmental agency or local authority, by an officer authorised in this behalf;
  - (e) in the case of a firm, by any partner thereof, not being a minor or authorised signatory thereof;
  - (f) in the case of any other association, by any member of the association or persons or authorised signatory thereof;
  - (g) in the case of a trust, by the trustee or any trustee or authorised signatory thereof; or
  - (h) in the case of any other person, by some person competent to act on his behalf, or by a person authorised in accordance with the provisions of section 48.
- (3) All notices, certificates and orders under the provisions of this Chapter shall be issued electronically by the proper officer or any other officer authorised to issue such notices or certificates or orders, through digital signature certificate specified under the provisions of the Information Technology Act, 2000 (21 of 2000).

#### Form GST CMP -01

[See rule 3(1)]

#### **Intimation to pay tax under section 10 (composition levy)**

(Only for persons registered under the existing law migrating on the appointed day)

1. GSTIN / Provisional ID					
2. Legal name					
3. Trade name, if any					
4. Address of Principal Place of Business					
5. Category of Registered Person < Select f	rom drop dov	wn>			
(i) Manufacturers, other than ma as notified by the Governmen		of such go	oods		
(ii) Suppliers making supplies r of paragraph 6 of Schedule II		ı clause (b	"		
(iii) Any other supplier eligible f	for composit	ion levy.			
6. Financial Year from which composition s	scheme is opt	ed	2017-18		
7. Jurisdiction	Centre		State		
8. Declaration –					
I hereby declare that the aforesaid business spayment of tax under section 10.	shall abide by	y the conditi	ions and restrictions specified for		
9. Verification					
I hereby solemnly affirm and declare that the information given hereinabove is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.					
		Signature	of Authorised Signatory		
			Name		
Place Date		Desig	gnation / Status		

# Form GST CMP -02

[See rule 3(2)]

Intimation to pay tax under section 10 (composition levy)

# (For persons registered under the Act)

tate					
strictions specified for					
I hereby solemnly affirm and declare that the information given hereinabove is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.					
sed Signatory					
atus					

Form GST -CMP-03

[See rule 3(4)]

Intimation of details of stock on date of opting for composition levy

# (Only for persons registered under the existing law migrating on the appointed day)

1. GSTIN		
2. Legal name		
3. Trade name, if any		
4. Address of Principal Place of Business		
5. Details of application filed to pay tax under	(i) Application refe	rence number
section 10	(ARN)	
section to	(ii) Date of filing	
6. Jurisdiction	Centre	State

# 7. Stock of purchases made from registered person under the existing law

Sr. No	GSTIN/TIN	Name of the	Bill/	Date	Value of	VAT	Central	Service	Total
		supplier	Invoice		Stock		Excise	Tax (if	
			No.					applicabl	
								e)	
1	2	3	4	5	6	7	8	9	10
1									
2									
Total									

# 8. Stock of purchases made from unregistered person under the existing law

Sr. No	Name of the unregistered person	Address	Bill/ Invoice No	Date	Value of Stock	VAT	Central Excise	Service Tax (if applicabl e	Total
1	2	3	4	5	6	7	8	9	
1									
2									
Total									
	1	J	1		1	I	I	I	

9. Details of tax paid	Description	Central Tax	State Tax / UT Tax
	Amount		
	Debit entry no.		

	<u> </u>
10. Verification	
I	hereby solemnly affirm and declare that the
information given hereinabove is true and correct	,

nothing has been concealed therefrom.	
Signature of Authorised Signatory	
Name Place	
Date Designation / Status	

### Form GST - CMP-04

[See rule 6(2)]

### **Intimation/Application for Withdrawal from Composition Levy**

1. GSTIN						
2. Legal na	ame					
3. Trade na	me, if any					
	of Principal Place of business	S				
<ol><li>Category</li></ol>	of Registered Person					
(iv)	Manufacturers, other than					
	of such goods as may be no	otified by the				
	Government					
(v)	Suppliers making supplie					
	clause (b) of paragraph 6 of					
(vi)	Any other supplier eligible	e for				
	composition levy.					
6. Nature o	f Business					
7. Date from	m which withdrawal from co	mposition scheme	e is sought	DD	MM	YYYY
8. Jurisdict	ion	Centre		State		•
9. Reasons	for withdrawal from compos	sition scheme		I.		
10. Verifica	ation					
I		by solemnly af	firm and	d declar	re that the	
information	n given hereinabove is true a	nd correct to the l	best of my know	ledge and	l belief	and nothing
has been co	oncealed therefrom.		•	-		_
		e of Authorised	Signator	V		
arginitate of framionate arginitory						
		Name				
Place			Tunic			
Date						
Date			Designation /	Ctatus		
			Designation /	Status		

Note – Stock statement may be furnished separately for availing input tax credit on the stock available on the date preceding the date from which composition option is withdrawn in **FORM GST ITC -01**.

# Form GST CMP- 05

[See rule 6(4)]

Reference No. << >>	<< Date >>
То	
GSTIN Name Address	
Notice for denial of optio	on to pay tax under section 10
the conditions and restrictions necessary for ava	come to my notice, it appears that you have violated tiling of the composition scheme under section 10 of on to you to pay tax under the said section for the
<ul><li>☐ You are hereby directed to furnish a reply date of service of this notice.</li></ul>	to this notice within fifteen working days from the
☐ You are hereby directed to appear before the	e undersigned on DD/MM/YYYY at HH/MM.
* * * * * * * * * * * * * * * * * * * *	ed date or fail to appear for personal hearing on the ed ex parte on the basis of available records and on
	Signature
	Name of Proper Officer
	Designation
	Jurisdiction
Place Date	

### Form GST CMP - 06

[See rule 6(5)]

# Reply to the notice to show cause

1.	GSTIN	
2.	Details of the show cause notice	Reference no. Date
3.	Legal name	
4.	Trade name, if any	
5.	Address of the Principal Place of Business	
6.	Reply to the notice	
7.	List of documents uploaded	
8.	Verification	I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.
		Signature of the Authorised Signatory
		Date Place
	<ol> <li>3.</li> <li>4.</li> <li>5.</li> <li>6.</li> </ol>	2. Details of the show cause notice  3. Legal name  4. Trade name, if any  5. Address of the Principal Place of Business  6. Reply to the notice  7. List of documents uploaded

### Note -

- 1. The reply should not be more than 500 characters. In case the same is more than 500 characters, then it should be uploaded separately.
- 2. Supporting documents, if any, may be uploaded in PDF format.

# Form GST CMP-07

[See rule 6(6)]

Reference No. << >>	Date-
То	
GSTIN Name Address	
Application Reference No. (ARN)	Date –
Order for acceptance	/ rejection of reply to show cause notice
reference no dated Ye	filed in response to the show cause notice issued vide our reply has been examined and the same has been found to on to pay tax under composition scheme shall continue. The
	or
reference no dated Yo	filed in response to the show cause notice issued vide our reply has been examined and the same has not been found otion to pay tax under composition scheme is hereby denied wing reasons:
	<< text >>
	or
☐ You have not filed any reply to the	e show cause notice; or
You did not appear on the day fix	xed for hearing.
Therefore, your option to pay tax under c date >> for the following reasons:	composition scheme is hereby denied with effect from <<
	<< Text >>
Date Place	Signature Name of Proper Officer
	Designation Jurisdiction

[See rule 8(1)]

### **Application for Registration**

(Other than a non-resident taxable person, a person required to deduct tax at source under section 51 and a person required to collect tax at source under section 52 and a person supplying online information and database access or retrieval services from a place outside India to a non-taxable online recipient referred to in section 14 of the Integrated Goods and Services Tax Act, 2017)

#### Part -A

			State /UT – $\nabla$	District -	
(i)	Legal Name of the Business:				
	(As mentioned in Permanent Ac	ccoun	t Number)		
(ii)	Permanent Account Number :				
	(Enter Permanent Account Nur Individual in case of Proprietor		of the Business; Permanent Accou	ant Number of	
(iii)	Email Address:				
(iv)	Mobile Number:				
Note	- Information submitted above is	s subje	ect to online verification before pr	roceeding to fill up Part-B.	
Aut	horised signatory filing the appli	cation	n shall provide his mobile number	and email address.	
			Part –B		
1.	Trade Name, if any				
2.	Constitution of Business (Ple	ase Se	elect the Appropriate)		
(i) Pr	oprietorship		(ii) Partnership		
(iii) I	Hindu Undivided Family		(iv) Private Limited Company		
(v) P	ublic Limited Company		(vi) Society/Club/Trust/Associa	tion of Persons	
(vii)	Government Department		(viii) Public Sector Undertaking		
(ix) U	Inlimited Company		(x) Limited Liability Partnership	)	
(xi) I	Local Authority		(xii) Statutory Body		
(xiii) Partn	Foreign Limited Liability ership		(xiv) Foreign Company Registe	red (in India)	
(xv)	Others (Please specify)				
3.	Name of the State	<b></b>	District	_	
4.	Jurisdiction		State	Centre	
			tor, Circle, Ward, Unit, etc. ers (specify)		

5.	Option for Composition	Yes		No					
	omposition Declaration  I hereby declare that the at the rules for opting to pay ta						onditions	and restrictions	specified in
	ory of Registered Person < ti								
(i)	Manufacturers, other that Government for which opt	n manufac	turers	of suc	h go	ods as	may be 1	notified by the	
(ii)	Suppliers making supplies	referred to	o in c	clause (b	) of p	aragrapl	6 of Sch	edule II	
(iii)	Any other supplier eligib	ole for com	positi	on levy.					
7.	Date of commencement of	business				DD/M	M/YYYY		
8.	Date on which liability to re	egister aris	es			DD/M	M/YYYY		
9.	Are you applying for regist person?	ration as a	casua	l taxable	:	Yes		No	
10.	If selected 'Yes' in Sr. No. registration is required	9, period f	or wh	ich		From DD/MN	A/YYYY	To DD/MM/YYYY	
11.	If selected 'Yes' in Sr. No. registration	9, estimate	ed sup	plies and	l estir	nated ne	t tax liabi	lity during the pe	eriod of
Sr. No.	Type of Tax		1	Turnove	r (Rs.	.)		Net Tax Liabili	ty (Rs.)
(i)	Integrated Tax								
(ii)	Central Tax								
(iii)	State Tax								
(iv)	UT Tax								
(v)	Cess								
	Total								
	Payment Details								
	Challan Identification Number			Dat	e			Amount	
12.	Are you applying for regist	ration as a	SEZ U	Unit?		Yes	7	No 🗆	<u> </u>
	(i) Select name of SEZ								$\nabla$
	(ii) Approval order number	and date o	of orde	er					·
	(iii) Designation of approvi	ng authorit	ty						
13.	Are you applying for regist	ration as a	SEZ I	Develope	er?	Yes		No $\Box$	

	(i) Select name of SEZ Developer			$\nabla$			
	(ii) Approval order number and date of order						
	(iii) Designation of approving authority						
14.	Reason to obtain registration:						
	(i) Crossing the threshold			ation of two or more			
	(ii) Inton State comply	registered persons (ix) Input Service Distributor					
	<ul><li>(ii) Inter-State supply</li><li>(iii) Liability to pay tax as recipient of goods or</li></ul>		rson liable to pay				
	services u/s 9(3) or 9(4)	(A) I C	ison nable to pay	ux u/3 )(3)			
	(iv) Transfer of business which includes change	(xi) Ta	axable person supp	plying through e-Commerce			
	in the ownership of business	portal					
	(if transferee is not a registered entity)						
	(v) Death of the proprietor	(X11) V	oluntary Basis				
	(if the successor is not a registered entity) (vi) De-merger	(viii) I	Persons supplying	goods and/or services on			
	(VI) De merger		of other taxable p				
	(vii) Change in constitution of business	(xiv) (	Others (Not covere	ed above) – Specify			
15.	Indicate existing registrations wherever applicable	<del>)</del>					
Registrat	ion number under Value Added Tax						
Central S	Sales Tax Registration Number						
Entry Ta	x Registration Number						
Entertain	ment Tax Registration Number						
Hotel and	d Luxury Tax Registration Number						
Central E	xcise Registration Number						
Service T	ax Registration Number						
Corporat	e Identify Number/Foreign Company Registration						
Number							
Limited I	iability Partnership Identification Number/Foreign						
Limited I	Liability Partnership Identification Number						
Importer/	Exporter Code Number						
Registrati	on number under Medicinal and Toilet						
Preparation	ons (Excise Duties) Act						
Registrati	on number under Shops and Establishment Act						
Temporar	ry ID, if any						
Others (P	lease specify)						
16. (a	a) Address of Principal Place of Business	1					
Building	No./Flat No.	Floor	No.				

Name of the Premises/	Building	5					Road/S	Stree	t							
City/Town/Locality/Vi	llage						Distric	t								
Taluka/Block	Faluka/Block															
State							PIN Co	ode								
Latitude Longitude																
(b) Contact Information	n															
Office Email Address					(	Office 7	Геlephon	e nu	mber	S	TD					
Mobile Number					(	Office I	Fax Num	ber		S	TD					
(c) Nature of premises	•									I.	<u> </u>					
Own	Lease	1		Re	nted		Cons	sent	,	Share	ed	(	Othe	ers (s	speci	fy)
(d) Nature of business	activity	being o	carrie	d out a	at abo	ove me	ntioned p	orem	ises (l	Pleas	e tick	appl	icab	le)		
Factory / Manufacturin	g		Wl	holesa	le Bu	isiness			Retail	Bus	iness					
Warehouse/Depot			Во	onded `	Ware	house			Suppl	ier o	f servi	ces				
Office/Sale Office			Le	asing	Busii	ness			Recip	ient (	of goo	ds or	ser	vices	S	
EOU/ STP/ EHTP		□ Works Contract □ Export														
Import			Otl	hers (S	Speci	fy)										
17. Details of Bank Ac	counts (	s)														
Total number of Bank business	Accour	nts mai	intain	ed by	the a	pplican	nt for con	duct	ing							
(Upto 10 Bank Accou	nts to be	repor	ted)													
Details of Bank Accou	nt 1															
Account Number																
Type of Account					•	1	IFSC		· ·		- II			Į.		•
Bank Name																
Branch Address	To b	e auto	-popu	lated	(Edit	mode)										
Note – Add more acc	ounts															
18. Details of the Good	ls suppli	ed by 1	the Bu	usines	S											
Please specify top 5 C	Goods															
Sr. Description No.	of Good	S				Н	ISN Cod	e (Fo	our dig	git)						
(i)																
(ii)																

(v)															
19. Details	of Services	s supplied	by the B	Busin	ess.	1									
Please spe	ecify top 5	Services													
Sr. No.	Description	n of Servic	es			I	HSN C	ode (Fo	ur digit)						
(i)															
(ii)															
(v)															
20. Details	s of Additio	onal Place(	s) of Bu	sine	SS	1									
Number o	of additiona	l places													
Premises 1															
	etails of Ad	ditional Pla	ace of B	usin	ess										
Building	No/Flat No							Floor N	lo						
Name of	the Premise	s/Building	Ţ,					Road/S	treet						
City/Tow	n/Locality/	Village						District	;						
Block/Ta	luka														
State								PIN Co	de						
Latitude								Longitu	ıde						
(b) Conta	ct Informat	ion													
Office En	nail Addres	s				Offi	ce Tel	ephone r	number	STD					
Mobile N	umber					Offi	ce Fax	Number	r	STD					
(c) Nature	e of premise	es													
Own	I	Leased		Re	nted		Conse	ent	Shared	d			ers ecify	·)	
(d) Nature	e of busines	s activity	being ca	rriec	l out at ab	ove m	ention	ed prem	ises (Pleas	e tick	appl	icab	le)		
Factory / Manufacturing					Wholesale	Busin	ness		Retail Bu	isiness	S				
Warehouse/Depot			I	Bonded W	areho	use		Supplier	of ser	vice	S				
Office/Sa	le Office			I	Leasing Bu	usines	S	☐ Recipient of g services			oods or				
EOU/ ST	P/ EHTP			V	Works Cor	ntract			Export						

Particulars	First I	Name	Middle	Name	La	st Name	
Name							
Photo							
Name of Father							
Date of Birth	DD/M	MM/YYYY	Gender	r		ale, Femal	e,
Mobile Number			Email	address			
Telephone No. with STD							
Designation /Status			Director Ide	entification	on Number (	if	
Permanent Account Number	r		Aadhaar Nu	ımber			
Are you a citizen of India?	Yes /		Passport No foreigners)	o. (in cas	se of		
Residential Address							
Building No/Flat No			Floor No				
Name of the Premises/Building			Road/Street				
City/Town/Locality/Village	;		District				
Block/Taluka							
State			PIN Code				
Country (in case of foreigne only)	er		ZIP code				
2. Details of Authorised Signat Checkbox for Primary Authorised Signatory No. 1		gnatory [					
Details of Signatory No. 1							

Date of Birth		DD/M	M/YYYY	Gen	der				<m< th=""><th>[ale,</th><th>Fen</th><th>nale,</th><th>Othe</th><th>er&gt;</th><th></th></m<>	[ale,	Fen	nale,	Othe	er>	
Mobile Num	ber			Ema	il add	ress									
Telephone N STD	o. with														
Designation /	'Status						ctor Id	lentific f any)	ation	1					
Permanent A Number	ccount					Aadl	naar N	umber							
Are you a cit India?	izen of	Yes / ]	No				port N gners)	lo. (in	case	of					
Resident	ial Address	in India													
Building	No/Flat No				Floo	r No									
Name of Premises	the Building				Road	d/Stree	et								
Block/Ta	aluka														
City/Tov	vn/Locality/	Village			Distr	rict									
State					PIN	Code									
23. Details of	Authorised	Represe	ntative												
Enrolment ID	, if available	e													
Provide follo	wing details	, if enrol	lment ID is	not av	vailabl	le									
Permanent Acc	count Number	r													
Aadhaar, if P Account Numl available															
		Fir	st Name		Midd	le Naı	ne		Las	t Na	ame				
Name of Pers	son														
Designation /	Status														
Mobile Num	ber														 
Email addres	s														 
Telephone N	o. with STD					FAX	No. w	vith ST	D						

Name of Father

	24.	State	S	pecific	Info	rmatio
--	-----	-------	---	---------	------	--------

Profession Tax Enrolment Code (EC) No.

Profession Tax Registration Certificate (RC) No.

State Excise License No. and the name of the person in whose name Excise License is held

- (a) Field 1
- (b) Field 2
- (c) ....
- (d) .....
- (e) Field n

#### 25. Document Upload

A customized list of documents required to be uploaded (refer rule 8) as per the field values in the form.

#### 26. Consent

I on behalf of the holder of Aadhaar number re-filled based on Aadhaar number provided in the
form> give consent to "Goods and Services Tax Network" to obtain my details from UIDAI for the
purpose of authentication. "Goods and Services Tax Network" has informed me that identity
information would only be used for validating identity of the Aadhaar holder and will be shared with
Central Identities Data Repository only for the purpose of authentication.

### 27. Verification (by authorised signatory)

I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom

	Signature
Place:	Name of Authorised Signatory
Date:	Designation/Status

# List of documents to be uploaded:-

1.	Photographs (wherever specified in the Application Form)  (a) Proprietary Concern – Proprietor  (b) Partnership Firm / Limited Liability Partnership – Managing/Authorised/Designated Partners (personal details of all partners are to be submitted but photos of only ten partners including that of Managing Partner are to be submitted)  (c) Hindu Undivided Family – Karta  (d) Company – Managing Director or the Authorised Person  (e) Trust – Managing Trustee  (f) Association of Persons or Body of Individuals –Members of Managing Committee (personal details of all members are to be submitted but photos of only ten members including that of Chairman are to be submitted)  (g) Local Authority – Chief Executive Officer or his equivalent  (h) Statutory Body – Chief Executive Officer or his equivalent  (i) Others – Person in Charge
2.	Constitution of Business: Partnership Deed in case of Partnership Firm, Registration Certificate/Proof of Constitution in case of Society, Trust, Club, Government Department, Association of Persons or Body of Individuals, Local Authority, Statutory Body and Others etc.
3.	Proof of Principal Place of Business:  (a) For Own premises —  Any document in support of the ownership of the premises like latest Property Tax Receipt or Municipal Khata copy or copy of Electricity Bill.  (b) For Rented or Leased premises —  A copy of the valid Rent / Lease Agreement with any document in support of the ownership of the premises of the Lessor like Latest Property Tax Receipt or Municipal Khata copy or copy of Electricity Bill.  (c) For premises not covered in (a) and (b) above —  A copy of the Consent Letter with any document in support of the ownership of the premises of the Consenter like Municipal Khata copy or Electricity Bill copy. For shared properties also, the same documents may be uploaded.  (d) For rented/leased premises where the Rent/lease agreement is not available, an affidavit to that effect along with any document in support of the possession of the premises like copy of Electricity Bill.  (e) If the principal place of business is located in a Special Economic Zone or the applicant is an Special Economic Zone developer, necessary documents/certificates issued by Government of India are required to be uploaded.
4	Bank Account Related Proof: Scanned copy of the first page of Bank passbook or the relevant page of Bank Statement or Scanned copy of a cancelled cheque containing name of the Proprietor or Business entity, Bank Account No., MICR, IFSC and Branch details including code.
5	Authorisation Form:- For each Authorised Signatory mentioned in the application form, Authorisation or copy of Resolution of the Managing Committee or Board of Directors to be filed in the following format:  Declaration for Authorised Signatory (Separate for each signatory) (Details of Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees

etc.)

I/We --- (name) being (Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc.) of ...... (name of registered person)

hereby solemnly affirm and declare that << name of the authorised signatory, (status/designation)>> is hereby authorised, vide resolution no... dated..... (copy submitted herewith), to act as an authorised signatory for the business << Goods and Services Tax Identification Number - Name of the Business>> for which application for registration is being filed under the Act. All his actions in relation to this business will be binding on me/ us.

Signature of the person competent to sign

Name:

Designation/Status:

(Name of the proprietor/Business Entity)

#### Acceptance as an authorised signatory

I <<(Name of the authorised signatory>> hereby solemnly accord my acceptance to act as authorised signatory for the above referred business and all my acts shall be binding on the business.

Signature of Authorised

Signatory Place:

(Name)

Date:

Designation/Status:

#### Instructions for submission of Application for Registration.

- 1. Enter name of person as recorded on Permanent Account Number of the Business. In case of Proprietorship concern, enter name of proprietor against Legal Name and mention Permanent Account Number of the proprietor. Permanent Account Number shall be verified with Income Tax database.
- 2. Provide E-mail Id and Mobile Number of authorised signatory for verification and future communication which will be verified through One Time Passwords to be sent separately, before filling up Part-B of the application.
- 3. Applicant need to upload scanned copy of the declaration signed by the Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc. in case the business declares a person as Authorised Signatory.
- 4. The following persons can digitally sign the application for new registration:-

Constitution of Business	Person who can digitally sign the application		
Proprietorship	Proprietor		
Partnership	Managing / Authorised Partners		
Hindu Undivided Family	Karta		
Private Limited Company	Managing / Whole-time Directors		
Public Limited Company	Managing / Whole-time Directors		
Society/ Club/ Trust/ AOP	Members of Managing Committee		
Government Department	Person In charge		
Public Sector Undertaking	Managing / Whole-time Director		
Unlimited Company	Managing/ Whole-time Director		
Limited Liability Partnership	Designated Partners		
Local Authority	Chief Executive Officer or Equivalent		
Statutory Body	Chief Executive Officer or Equivalent		
Foreign Company	Authorised Person in India		
Foreign Limited Liability Partnership	Authorised Person in India		
Others (specify)	Person In charge		

- 5. Information in respect of authorised representative is optional. Please select your authorised representative from the list available on the common portal if the authorised representative is enrolled, otherwise provide details of such person.
- 6. State specific information are relevant for the concerned State only.
- 7. Application filed by undermentioned persons shall be signed digitally:-

Sr. No	Type of Applicant	Type of Signature required
--------	-------------------	----------------------------

Sr. No	Type of Applicant	Type of Signature required	
1.	Private Limited Company Public Limited Company Public Sector Undertaking Unlimited Company Limited Liability Partnership Foreign Company Foreign Limited Liability Partnership	Digital Signature Certificate (DSC)-Class-2 and above.	
2.	Other than above	Digital Signature Certificate class 2 and above e-Signature or any other mode as may be notified	

- 8. All information related to Permanent Account Number, Aadhaar, Director Identification Number, Challan Identification Number shall be validated online by the system and Acknowledgment Receipt Number will be generated after successful validation of all the filled up information.
- 9. Status of the application filed online can be tracked on the common portal by entering Application Reference Number (ARN) indicated on the Acknowledgment.
- 10. No fee is payable for filing application for registration.
- 11. Authorised signatory shall not be a minor.
- 12. Any person having multiple business verticals within a State, requiring a separate registration for any of its business verticals shall need to apply separately in respect of each of the vertical.
- 13. After approval of application, registration certificate shall be made available on the common portal.
- 14. Temporary Reference Number (TRN) will be allotted after successfully furnishing preliminary details in PART –A of the application which can be used for filling up details in PART-B of the application. TRN will be available on the common portal for a period of 15 days.
- 15. Any person who applies for registration under rule 8 may give an option to pay tax under section 10 in Part B of FORM GST REG-01, which shall be considered as an intimation to pay tax under the said section.

[See rule 8(5)]

# Acknowledgment

Application Reference Number (ARN) -				
You have filed the application successfully and the particulars of the application are given as under:				
Date of filing	:			
Time of filing	:			
Goods and Services Tax Identification Number, if available :				
Legal Name	:			
Trade Name (if applicable)	:			
Form No.	:			
Form Description:				
Center Jurisdiction	:			
State Jurisdiction:				
Filed by	:			
Temporary reference number (TRN), if any:				
Payment details* : Challan Identification Number				
	: Date			
	: Amount			
It is a system generated acknowledgement and does not require any signature.				
* Applicable only in case of Casual taxable person and Non Resident taxable person				

[See rule 9(2)]

Reference Number:	Date-
To Name of the Applicant:	
Address:	
GSTIN (if available):	Data
Application Reference No. (ARN):	Date:
Notice for Seeking Additional Information / crelating to Application for << Registration/An	
This is with reference to your << registration/amendment/cancellat –DD/MM/YYYY The Department has examined your application reasons:  1.  2.  3.	**
You are directed to submit your reply by (DD/MM/\(^\) *You are hereby directed to appear before the undersig (HH:MM)	
If no response is received by the stipulated date, your app no further notice / reminder will be issued in this matter	plication is liable for rejection. Please note that
	Signature
	me of the Proper Officer:
	signation:
Jun	isdiction:
* Not applicable for New Registrati	ion Application

[See rule 9(2)]

# Clarification/additional information/document for <<Registration/Amendment/Cancellation>>

1.	Notice details	Reference No.		Date		
2.	Application details	Reference No		Date		
3.	GSTIN, if applicable		1			
4.	Name of Business (Legal)					
5.	Trade name, if any					
6.	Address					
7.	Whether any modification	on in the application for registration or fields is required Yes				
					No 🗆	
					(Tick one)	
8.	Additional Information					
9.	List of Documents uploaded					
10.	Verification					
	I hereby solemnly affirm and declare that the information given hereinabove is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.					
				Signature	of Authorised Signatory	
				Name		
				Designation	on/Status:	
	Place:					
	Date:					

#### Note:-

- 1. For new registration, original registration application will be available in editable mode if option 'Yes' is selected in item 7.
- 2. For amendment of registration particulars, the fields intended to be amended will be available in editable mode if option 'Yes' is selected in item 7.

[See rule 9(4)]

Reference Number:	Date-
т.	
То	
Name of the Applicant	
Address -	
GSTIN (if available)	

# Order of Rejection of Application for <Registration / Amendment / Cancellation/

This has reference to your reply filed vide ARN --- dated----. The reply has been examined and the same has not been found to be satisfactory for the following reasons:

- 1.
- 2. 3.
- ...Therefore, your application is rejected in accordance with the provisions of the Act.

Or

You have not replied to the notice issued vide reference no. ....... dated ........ within the time specified therein. Therefore, your application is hereby rejected in accordance with the provisions of the Act.

Signature Name Designation Jurisdiction



#### Government of Gujarat Form GST REG-06 [See rule 10(1)]

# **Registration Certificate**

Registration Number: < GSTIN/ UIN >

1.	Legal Name				
1.	Legai Name				
2.	Trade Name, if any				
3.	Constitution of Business				
4.	Address of Principal Place of Business				
5.	Date of Liability	DD/MM/ YYYY			
6.	Period of Validity  (Applicable only in case of Non-Resident taxable person or Casual taxable person)	From	DD/MM/YYYY	То	DD/MM/YYYY
7.	Type of Registration		•		•
8.	Particulars of Approving Au	ithority			
Centre			State		
		Si	gnature		
Name					
Designation					
Office					
9. Dat	te of issue of Certificate				
Note:	The registration certificate is	required to be promin	nently displayed at all places of	business in	the State.

#### Annexure A



#### **Details of Additional Places of Business**

Goods and Services Tax Identification Number

Legal Name

Trade Name, if any

Total Number of Additional Places of Business in the State

Sr. No. Address

1

2

3

...



Goods and Services Tax Identification Number

#### Legal Name

Trade Name, if any

Details of <Proprietor / Partners / Karta / Managing Director and whole-time Directors / Members of the Managing Commit Association of Persons / Board of Trustees etc.>

1.		Name
	Photo	Designation/Status
		Resident of State
2.		Name
	Photo	Designation/Status
		Resident of State
3.		Name
	Photo	Designation/Status
		Resident of State
4.		Name
	Photo	Designation/Status
		Resident of State
5.		Name
	Photo	Designation/Status
		Resident of State
6.		Name
	Photo	Designation/Status
		Resident of State
7.		Name
	Photo	Designation/Status
		Resident of State
8.	Photo	Name

		Designation/Status
		Resident of State
9.		Name
	Photo	Designation/Status
		Resident of State
10.		Name
	Photo	Designation/Status
		Resident of State

[See rule 12(1)]

#### Application for Registration as Tax Deductor at source (u/s 51) or Tax Collector at source (u/s 52)

State /UT- District -

#### Part -A

(i)	Legal Name of the Tax Deductor or Tax Collector( As mentioned in Permanent Account Number/ Tax Deduction and Collection Account Number)									
(ii)	Perr	Permanent Account Number								
		(Enter Permanent Account Number of the Business; Permanent Account Number of Individual in case of Proprietorship concern)								
(iii)	Tax	Deduction and Collection A	ccount l	Number						
	,	ter Tax Deduction and Colleavailable)	ection Ac	ecount Number, if Perm	anent Accou	ant Number is				
(iv)	Ema	il Address								
(v)	Mol	pile Number								
Note -	Infor	mation submitted above is st	ıbject to	online verification befo	re proceedir	ng to fill up Part-B	3.			
				Part –B						
1	Trac	le Name, if any								
2	Con	stitution of Business (Please	Select t	he Appropriate)						
(i) Pro	prieto	rship		(ii) Partnership						
(iii) Hi	indu U	Individed Family		(iv) Private Limited	Company					
(v) Pul	blic L	imited Company		(vi) Society/Club/Tru	st/Associati	on of Persons				
(vii) G	overn	ment Department		(viii) Public Sector Undertaking						
(ix) Uı	nlimite	ed Company		(x) Limited Liability	Partnership					
(xi) Lo	ocal A	uthority		(xii) Statutory Body						
(xiii) F Partne	_	n Limited Liability		(xiv) Foreign Company Registered (in India)						
(xv) C	Others	(Please specify)								
3	Nan	ne of the State	_		District		<b></b>			
4	Juris	sdiction -	State	2		Centre				
			Sector etc.	or /Circle/ Ward /Cha	rge/Unit					
5	Type of registration				Tax Deduc	ctor O Tax Col	llector			
6.	Gov	ernment (Centre / State/Uni	on Territ	cory)	Center	Stat	e/UT			
7.		Date of liability to deduct/o	collect ta	x DD/MM/YYYY	,					
8.		(a) Address of principal pla	ace of bu	isiness						

Name of the Premises/Building					
		Road/Street			
City/Town/Locality/Village			District		
Block/Taluka					
Latitude			Longitude		
State		PIN Code			
(b) Contact Information					
Office Email Address		Office Teleph			
Mobile Number		Office Fax N	umber		
(c) Nature of possession of pro-	emises				
	eased	Rented	Consent	Shared	Others(specify)
9. Have you obtained any oth registrations under Goods Tax in the same State?		Y	Yes	No _	
10 If Yes, mention Goods and Tax Identification Number					
11 IEC (Importer Exporter Coapplicable	ode), if				
12 Details of DDO (Drawing	and Disbursing	g Officer) / Pers	son responsible fo	or deducting ta	x/collecting tax
Particulars					
Name	First Name		Middle Name		Last Name
Father's Name					
Photo					
Date of Birth	DD/MM/YYY	ΥY	Gender		<male, female,="" other=""></male,>
Mobile Number		Email address			
Telephone No. with STD					
Designation /Status		Director Identification Number (if any)			
Permanent Account Number		Aadhaar Number			
Are you a citizen of India? Yes / N		Passport No.	(in case of Forei	gners)	
Residential Address					

Name of the	Premises/Buildin	g	Locality/Village									
State				PIN C	ode							
Checkbox for	of Authorised Signor Primary Authorignatory No. 1											
Particulars		First Name	Mie	ddle Na	me	Last Name	e					
Name												
Photo												
Name of F	ather											
Date of Bir	rth	DD/MM/YYYY	Ger	nder		<male, fer<="" td=""><td>male, C</td><td>ther&gt;</td><td></td><td></td><td></td><td></td></male,>	male, C	ther>				
Mobile Nu	mber		Em	ail addr	ress							
Telephone	No. with STD											
Designatio	on /Status				Director Identificat Number (if any)	ion						
Permanent Number	Account				Aadhaar Number							
Are you a	citizen of India?	Yes / No			Passport No. (in case of foreigners)							
Residenti	al Address (Within	n the Country)										
Building 1	No/Flat No				Floor No							
Name of t	the Premises/Build	ling		Road/Street								
City/Tov	vn/Locality/Villa	nge			District							
State					PIN Code							
Block/Tal	luka									ı		
Note – Add	more	1			1							
14.	Consent											
	to "Goods and S and Services Tax	Services Tax Netwo & Network" has inj	ork" to formed	obtain me tha	-filled based on Aadi my details from UID t identity information al Identities Data Re	AI for the pu	rpose o be used	of auth d for v	nentic alide	cation uting	n. "G ident	foods tity of

15.		<b>Verification</b> emnly affirm and declare that the information given herein above is true and correct to the best of my and belief and nothing has been concealed therefrom	
		(Signature)	
	Place:	Name of DDO/ Person responsible for deducting tax/collecting tax/Authorised Signatory	
	Date:	Designation	

# List of documents to be uploaded (not applicable to a department or establishment of the Central Government or State Government or Local Authority or Governmental agencies):-

Proof of Principal Place of Business:

(a) For Own premises –

Any document in support of the ownership of the premises like latest Property Tax Receipt or Municipal Khata copy or copy of Electricity Bill.

(b) For Rented or Leased premises –

A copy of the valid Rent / Lease Agreement with any document in support of the ownership of the premises of the Lessor like Latest Property Tax Receipt or Municipal Khata copy or copy of Electricity Bill.

(c) For premises not covered in (a) and (b) above –

A copy of the Consent Letter with any document in support of the ownership of the premises of the Consenter like Municipal Khata copy or Electricity Bill copy. For shared properties also, the same documents may be uploaded.

- (d) For rented/leased premises where the Rent/lease agreement is not available, an affidavit to that effect along with any document in support of the possession of the premises like copy of Electricity Bill.
- (e) If the principal place of business is located in an Special Economic Zone or the applicant is an Special Economic Zone developer, necessary documents/certificates issued by Government of India are required to be uploaded.

#### Instructions for submission of application for registration as Tax Deductor/ Tax Collector.

- 1. Enter name of Tax Deductor /Tax Collector as recorded on Tax Deduction and Collection Account Number/Permanent Account Number of the Business. Tax Deduction and Collection Account Number/Permanent Account Number shall be verified with Income Tax database.
- 2. Provide Email Id and Mobile Number of DDO (Drawing and Disbursing Officer) / Person responsible for deducting tax/collecting tax for verification and future communication which will be verified through One Time Passwords to be sent separately, before filling up of the application.
- 3. Person who is acting as DDO/ Person deducting/collecting tax can sign the application.
- 4. The application filed by undermentioned persons shall be signed digitally.

Sr. No	Type of Applicant	Digital Signature required
1.	Private Limited Company	Digital Signature Certificate(DSC) class 2 and above
	Public Limited Company	
	Public Sector Undertaking	
	Unlimited Company	
	Limited Liability Partnership	
	Foreign Company	
	Foreign Limited Liability Partnership	
2.	Other than above	Digital Signature Certificate class 2 and above, e-Signature or any other mode as specified or as may be notified.

- 5. All information relating to Permanent Account Number, Aadhaar, Director Identification Number, Challan Identification Number shall be validated online by the system and Acknowledgment Receipt Number will be generated after successful validation of all the filled information.
- 6. Status of the application filed online can be tracked on the Common portal.
- 7. No fee is payable for filing application for registration.
- 8. Authorised shall not be a minor.

[See rule 12(3)]

Reference No	Date:
To Name:	
Address:	
Application Reference No. (ARN) (Reply)	Date:
Order of Cancellation of Registration as Tax Deductor at source or Tax O	Collector at source
This has reference to the show-cause notice issued vide Reference Number data registration under the Act.  Whereas no reply to show cause notice has been filed; or Whereas on the day fixed for hearing you did not appear; or Whereas your reply to the notice to show cause and submissions made at the examined. The undersigned is of the opinion that your registration is liable to be or reason(s).	time of hearing have been
<ol> <li>2.</li> <li>The effective date of cancellation of registration is &lt;<dd mm="" yyyy="">&gt;.</dd></li> </ol>	

You are directed to pay the amounts mentioned below on or before ----- (*date*) failing which the amount will be recovered in accordance with the provisions of the Act and rules made thereunder. (This order is also available on your dashboard).

Head	Integrated tax	Central tax	State tax	UT Tax	Cess
Tax					
Interest					
Penalty					
Others					
Total					

Signature Name

Designation Jurisdiction

[See rule 13(1)]

# **Application for Registration of Non Resident Taxable Person**

#### Part -A

	State /UT – District -	
(i)	Legal Name of the Non-Resident Taxable Person	
(ii)	Permanent Account Number of the Non-Resident Taxable person, if any	
(iii)	Passport number, if Permanent Account Number is not available	
(iv)	Tax identification number or unique number on the basis of which the entity is identified by the Government of that country	
(v)	Name of the Authorised Signatory (as per Permanent Account Number)	
(vi)	Permanent Account Number of the Authorised Signatory	
(vii)	Email Address of the Authorised Signatory	
(viii)	Mobile Number of the Authorised Signatory (+91)	
Note -	Relevant information submitted above is subject to online verification, where practicable, befo	re proceeding to fill

#### Part -B

up Part-B.

1.	Details of Authorised Signator	Details of Authorised Signatory (should be a resident of India)					
	First Name	Middle Name	Last Name				
	Photo						
	Gender		Male / Female / Others				
	Designation						
	Date of Birth		DD/MM/YYYY				
	Father's Name						
	Nationality						
	Aadhaar						
	Address of the Authorised sign	atory.	Address line 1 Address Line 2				
			Address line 3				
2.	Period for which registration is required	From	То				
		DD/MM/YYYY	DD/MM/YYYY				

_			Estimated Turnover (Rs.)		Estima	Estimated Tax Liability (Net) (Rs.)				
3	Turnover Details	Intra- State	Inter –State	Central Tax	State Tax	UT Tax	Integrated Tax	Cess		
	A 11 CNL D		.1	Company of	0					
		Address of Non-Resident taxable person in the Country of Origin  (In case of business entity - Address of the Office)								
	Address Line 1									
	Address Line 2									
4	Address Line 3	Address Line 3								
	Country (Drop Do	own)								
	Zip Code									
	E mail Address									
	Telephone Numbe	er								
	Address of Principal Place of Business in India									
	Building No./Flat No.			Floor N	Floor No.					
	Name of the Premises/Building			Road/S	Road/Street					
	City/Town/Village/Locality				District					
5	Block/Taluka			Distric						
	Latitude			Longitu	Longitude					
	State			PIN Co	PIN Code					
	Mobile Number			Teleph	one Numbe	r				
	E mail Address			Fax Nu	mber with	STD				
	Details of Bank A	ccount in Inc	lia	l						
	Account			Type o	f account					
6	Number			1,750						
	Bank Name		Branch Ado	dress				IFSC		
	Documents Uploa	ded		l.				L		
7	A customized list of documents required to be uploaded (refer Instruction) as per the field values in the form						rm			
	Declaration  I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.						o the best of my			
8 Signature					ature					
	Place:						Name of A	uthorised Signat	ory	
	Date:						Designatio	_	-	

**Note:** Non-Resident taxable person is required to upload declaration (as per under mentioned format) along with scanned copy of the passport and photograph. **List of documents to be uploaded as evidence are as follows:-**

1.	Proof of Principal Place of Business:  (a) For own premises —  Any document in support of the ownership of the premises like Latest Property Tax Receipt or Municipal Khata copy or copy of Electricity Bill.  (b) For Rented or Leased premises —  A copy of the valid Rent / Lease Agreement with any document in support of the ownership of the premises of the Lessor like latest Property Tax Receipt or Municipal Khata copy or copy of Electricity Bill.  (c) For premises not covered in (a) and (b) above —  A copy of the Consent Letter with any document in support of the ownership of the premises of the Consenter like Municipal Khata copy or Electricity Bill copy. For shared properties also, the same documents may be uploaded.
2.	Proof of Non-resident taxable person: Scanned copy of the passport of the Non -resident taxable person with VISA details. In case of a business entity incorporated or established outside India, the application for registration shall be submitted along with its tax identification number or unique number on the basis of which the entity is identified by the Government of that country or it's Permanent Account Number, if available.
3	Bank Account related proof: Scanned copy of the first page of Bank passbook or the relevant page of Bank Statement or Scanned copy of a cancelled cheque containing name of the Proprietor or Business entity, Bank Account No., MICR, IFSC and Branch details including code.
4	Authorisation Form:  For each Authorised Signatory mentioned in the application form, Authorisation or copy of Resolution of the Managing Committee or Board of Directors to be filed in the following format:Declaration for Authorised Signatory (Separate for each signatory) (Details of Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc.)I/We (name) being (Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc.) of (name of registered person) hereby solemnly affirm and declare that < <name (status="" authorised="" designation)="" of="" signatory,="" the="">&gt; is hereby authorised, vide resolution no dated (Copy submitted herewith), to act as an authorised signatory for the business &lt;&lt; Goods and Services Tax Identification Number - Name of the Business&gt;&gt; for which application for registration is being filed under the Act. All his actions in relation to this business will be binding on me/ us.  Signature of the person competent to sign</name>
	Name:
	Designation/Status:
	(Name of the proprietor/Business Entity)
	Acceptance as an authorised signatory Acceptance as an authorised signatory
	I <<(Name of the authorised signatory>> hereby solemnly accord my acceptance to act as authorised signatory for the above referred business and all my acts shall be binding on the business.
	Signature of Authorised Signatory
	Place:
	Date:  Designation/Status:

#### Instructions for submission of application for registration as Non-Resident Taxable Person.

- 1. Enter Name of the applicant Non-Resident taxable person as recorded on Passport.
- 2. The applicant shall apply at least **Five** days prior to commencement of the business at the common portal.
- 3. The applicant needs to provide Email Id and Mobile Number for verification and future communication which will be verified through One Time Passwords to be sent separately, before filling up Part-B of the application.
- 4. The applicant needs to upload the scanned copy of the declaration signed by the Proprietor/all Partners /Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc. in case the business declares a person as Authorised Signatory.
- 5. The application filed by the under-mentioned persons shall be signed digitally:-

Sr. No	Type of Applicant	Digital Signature required
1.	Private Limited Company Public Limited Company Public Sector Undertaking Unlimited Company Limited Liability Partnership Foreign Company Foreign Limited Liability Partnership	Digital Signature Certificate(DSC) class 2 and above
2.	Other than above	Digital Signature Certificate class 2 and above e-Signature or as may be notified

- 6. All information related to Permanent Account Number, Aadhaar, shall be online validated by the system and Acknowledgment Receipt Number will be generated after successful validation of all filled up information.
- 7. Status of the application filed online can be tracked on the common portal.
- 8. No fee is payable for filing application for registration
- 9. Authorised signatory shall be an Indian national and shall not be a minor.

[See rule 14(1)]

Application for registration of person supplying online information and data base access or retrieval services from a place outside India to a person in India, other than a registered person.

### Part -A

State /UT – District -

(i)	Legal Name of the person	
(ii)	Permanent Account Number of the person, if any	
(iii)	Tax identification number or unique number on the basis of which the entity is identified by the Government of that country	
(iv)	Name of the Authorised Signatory	
(v)	Permanent Account Number of the Authorised Signatory	
(vi)	Email Address of the Authorised Signatory	
(vii)	Mobile Number of the Authorised Signatory (+91)	

*Note* - Relevant information submitted above is subject to online verification, where practicable, before proceeding to fill up Part-B.

#### Part -B

1.	Details of Authorised Signatory (shall be resident of India)				
	First Name	Middle Name	Last Name		
	Photo				
	Gender		Male / Female / Others		
	Designation				
	Date of Birth		DD/MM/YYYY		
	Father's Name				
	Nationality				
	Aadhaar, if any				
			Address line 1		
	Address of the Authorised Signatory		Address line 2		
			Address line 3		
2.	Date of commencement of the online service in India.		DD/MM/YYYY		

Uniform Resource Locators (URLs) of the website through which taxable services are provided:  1.						
3						
Jurisdiction		Center				
Details of Bank Acc	count					
Account Number			Type of account			
Bank Name		Branch Address			IFSC	
Documents Upload	Documents Uploaded					
A customized list of documents required to be uploaded (refer Instruction) as per the field values in the form						
Declaration  I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.						
I, hereby declare that I am authorised to sign on behalf of the Registrant. I would charge and collect tax liable from the non-assesse online recipient located in taxable territory and deposit the same with Government of India.						
Signature						
Place:			Name of Authorised Signatory:			
Date: Designation:						
	1. 2. 3 Jurisdiction Details of Bank Account Number Bank Name Documents Uploade A customized list of Declaration I hereby solemnly a knowledge and beli I, and collect tax liah Government of Indi Place:	1. 2. 3  Jurisdiction  Details of Bank Account  Account Number  Bank Name  Documents Uploaded  A customized list of documents required the solution of the	1. 2. 3  Jurisdiction  Center  Details of Bank Account  Account Number  Bank Name  Branch Address  Documents Uploaded  A customized list of documents required to be uploaded  Declaration  I hereby solemnly affirm and declare that the information knowledge and belief and nothing has been concealed.  I,	1. 2. 3  Jurisdiction  Center  Details of Bank Account  Account Number  Bank Name  Branch Address  Documents Uploaded  A customized list of documents required to be uploaded (refer Instruction)  Declaration  I hereby solemnly affirm and declare that the information given herein a knowledge and belief and nothing has been concealed therefrom.  I,	1. 2. 3  Jurisdiction  Center  Details of Bank Account  Account Number  Bank Name  Branch Address  Documents Uploaded  A customized list of documents required to be uploaded (refer Instruction) as per the field  Declaration  I hereby solemnly affirm and declare that the information given herein above is true as knowledge and belief and nothing has been concealed therefrom.  I,	1. 2. 3  Jurisdiction Center  Details of Bank Account  Account Number Type of account  Bank Name Branch Address IFSC  Documents Uploaded  A customized list of documents required to be uploaded (refer Instruction) as per the field values in the standard process of the

Note: Applicant will require to upload declaration (as per under mentioned format) along with scanned copy of the passport and photograph.

List of documents to be uploaded as evidence are as follows:-

1.	Proof of Place of Business in India:
	(a) For Own premises –
	Any document in support of the ownership of the premises like Latest Property Tax Receipt or
	Municipal Khata copy or copy of Electricity Bill.
	(b) For Rented or Leased premises –
	A copy of the valid Rent / Lease Agreement with any document in support of the ownership of the
	premises of the Lessor like Latest Property Tax Receipt or Municipal Khata copy or copy of
	Electricity Bill.
	(c) For premises not covered in (a) and (b) above –
	A copy of the Consent Letter with any document in support of the ownership of the premises of the
	Consenter like Municipal Khata copy or Electricity Bill copy. For shared properties also, the same
	documents may be uploaded.
	documents may be aproduced.
2.	Proof of:
	Scanned copy of the passport of the Non -resident tax payer with VISA details. In case of
	Company/Society/LLP/FCNR/ etc. person who is holding power of attorney with authorisation
	letter.
	Scanned copy of Certificate of Incorporation if the Company is registered outside India or in India
	Scanned copy of License is issued by origin country
	Scanned copy of Clearance certificate issued by Government of India
3	Bank Account Related Proof:
	Scanned copy of the first page of Bank passbook / one page of Bank Statement
	Opening page of the Bank Passbook held in the name of the Proprietor / Business Concern –
	· · · · · · · · · · · · · · · · · · ·

containing the Account No., Name of the Account Holder, MICR and IFSC and Branch details. 4 Authorisation Form:-For Authorised Signatory mentioned in the application form, Authorisation or copy of Resolution of the Managing Committee or Board of Directors to be filed in the following format: Declaration for Authorised Signatory (Separate for each signatory) I --- (Managing Director/Whole Time Director/CEO or Power of Attorney holder) hereby solemnly affirm and declare that <<name of the authorised signatory>> to act as an authorised signatory for the business << Name of the Business>> for which application for registration is being filed/ is registered under the Goods and Service Tax Act, 20\_\_. All his actions in relation to this business will be binding on me/ us. Signatures of the persons who is in charge. Full Name S. No. Designation/Status Signature 1. Acceptance as an authorised signatory I <<(Name of authorised signatory>> hereby solemnly accord my acceptance to act as authorised signatory for the above referred business and all my acts shall be binding on the business. Signature of Authorised Signatory Place (Name) Date: Designation/Status

[See rule 15(1)]

### Application for extension of registration period by casual / non-resident taxable person

1.	GSTIN							
2.	Name (Legal)							
3.	Trade Name, if any							
4.	Address							
5.	Period of Validity (o	riginal)	Froi	n		То		
	•		DD/MM/	YYYY	D	DD/MM/YYYY		
6.	Period for which exte	ension is requested.	Froi	n	То			
		_	DD/MM/	YYYY	D	D/MM/YYY	Y	
7.	Turnover Details for the extended period (Rs.)		Estimated T (Rs.)	ax Liabilit	y (Net) fo	or the extend	ed period	
	Inter- State	Intra-State	Central Tax	State Tax	UT Tax	Integrated Tax	Cess	
8.	Payment details							
	Date	CIN	BRI	N		Amount		
9.	Declaration - I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.							
				Signa	ıture			
Place	Place:			Name of Authorised Signatory:				
Date	:	Designa	ntion / Statu	ıs:				

#### Instructions for submission of application for extension of validity

- 1. The application can be filed online before the expiry of the period of validity.
- 2. The application can only be filed when advance payment is made.
- 3. After successful filing, Application Reference Number will be generated which can be used to track the status of the application.

[See rule 16(1)]

Reference Number -	Date:
To	
(Name):	
(Address):	
Temporary Registration Number	

#### Order of Grant of Temporary Registration/Suo Moto Registration

Whereas the undersigned has sufficient reason to believe that you are liable for registration under the Act, and therefore, you are hereby registered on a temporary basis. The particulars of the business as ascertained from the business premises are given as under:

		Details of person to whom temporary re	gistration granted
1.	Name and Lega	al Name, if applicable	
2.	Gender		Male/Female/Other
3.	Father's Name		
4.	Date of Birth		DD/MM/YYYY
5.	Address of the Person	Building No./ Flat No.  Floor No.  Name of Premises/ Building  Road/ Street  Town/City/Locality/ Village  Block / Taluka  District  State  PIN Code	
6.	Permanent Acavailable	ccount Number of the person, if	
7.	Mobile No.		
8.	Email Address		
9.	Other ID, if any (Voter ID No Aadhaar No./ O	./ Passport No./Driving License No./	
10.	Reasons for ter	mporary registration	

11.	Effective date of registration / temporary ID
12.	Registration No. / Temporary ID
(Upload	d of Seizure Memo / Detention Memo / Any other supporting documents)
< <you order&gt;&gt;</you 	are hereby directed to file application for proper registration within 30 days of the issue of this
	Signature
Place	<< Name of the Officer>>:
Date:	Designation/ Jurisdiction:
Not	e: A copy of the order will be sent to the corresponding Central/ State Jurisdictional Authority.

[See rule 17(1)]

# Application/Form for grant of Unique Identity Number to UN Bodies / Embassies / others

State /Union Territory- District - PART A

(i)	Name of the Entity								
(ii)	Permanent Account Numotified)								
(iii)	Name of the Authorised	Signatory							
(iv)	Permanent Account Nu	mber of Autho	orised Signatory						
(v)	Email Address of the A	uthorised Sign	natory						
(vi)	) Mobile Number of the A	Authorised Sig	gnatory (+91)						
			PART	B					
1.	Type of Entity (Choose one	e) 1	UN Body	Embassy Other Pe	rson				
2.	Country								
3.	Notification Details			Notification No.	Date				
4.	4. Address of the entity in State								
	Building No./Flat No.			Floor No.					
	Name of the Premises/Buil	ding		Road/Street					
	City/Town/Village			District					
	Block/Taluka								
	Latitude			Longitude					
	State			PIN Code					
	Contact Information								
	Email Address			Telephone number					
	Fax Number			Mobile Number					
7.	Details of Authorised Sign	atory, if applic	cable						
	Particulars	First Na	me	Middle Name	Last name				
	Name								
	Photo								
	Name of Father								
	Date of Birth	DD/MM	I/YYYY	Gender	<male, female,="" other=""></male,>				
	Mobile Number			Email address					

	Telephone No.								
	Designation /Status		Director Identification Number (if any)						
	Permanent Account Number		Aadhaar Number	er					
	Are you a citizen of India?	Yes / No	Passport No. (in case of foreigners)						
	Residential Address								
	Building No/Flat No		Floor No						
	Name of the Premises/Building		Road/Street						
	Town/City/Village		District						
	Block/Taluka								
	State		PIN Code						
8	Bank Account Details (add mo	ore if required)			1				
	Account Number		Type of Account						
	IFSC		Bank Name						
	Branch Address		<b>I</b>						
9.	Documents Uploaded								
	The authorised person who is in possession of the documentary evidence ( <u>other than</u> UN Body/ Embassy etc.) shall upload the scanned copy of such documents including the copy of resolution / power of attorney, authorising the applicant to represent the entity.								
	Or								
	The proper officer who has collected the documentary evidence from the applicant (UN Body/ Embassy etc.) shall upload the scanned copy of such documents including the copy of resolution / power of attorney, authorising the applicant to represent the UN Body / Embassy etc. in India and link it along with the Unique Identity Number generated and allotted to respective UN Body/ Embassy etc.							the	
11.	Verification								
	I hereby solemnly affirm and a knowledge and belief and noth		n given herein above is true and erefrom.	corre	ct to	the	best	of	ту
	Place:		(Signa	iture)					
	Date:		Name of Authorised	Person:					
	Or								
				nature)					
	Place: Date:		Name of Proper Offi Designation: Jurisdiction:	cer:					

# Instructions for submission of application for registration for UN Bodies/ Embassies/others notified by the Government.

- Every person required to obtain a unique identity number shall submit the application electronically.
- Application shall be filed through common portal or registration can be granted suo-moto by proper officer.
- The application filed on the common portal is required to be signed electronically or through any other mode as specified by the Government.
- The details of the person authorised by the concerned entity to sign the refund application or otherwise, should be filled up against the "Authorised Signatory details" in the application.

[See rule 19(1)]

# Application for Amendment in Registration Particulars (For all types of registered persons)

1. GSTIN	/UIN						
2. Name	of Business						
3. Type of	registration						
4. Amend	lment summary						
Sr. No	Field Name	Effective (DD/MM		Reasons(s)			
5. List of	documents uploaded						
(a)							
(b)							
(c)							
6. Declaration I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom							
				Signature			
	Place:		Name of Authorised Signatory				
	Date:			Designation / Status:			

#### Instructions for submission of application for amendment

- 1. Application for amendment shall be submitted online.
- 2. Changes relating to Name of Business, Principal Place of Business, additional place(s) of business and details of partners or directors, karta, Managing Committee, Board of Trustees, Chief Executive Officer or equivalent, responsible for day to day affairs of the business which does not warrant cancellation of registration, are core fields which shall be approved by the Proper Officer after due verification.
- 3. For amendment in Non-Core fields, approval of the Proper Officer is not required.
- 4. Where a change in the constitution of any business results in change of the Permanent Account Number of a registered person, the said person shall be required to apply for fresh registration.
- 5. Any change in the mobile number or the e-mail address of authorised signatory as amended from time to time, shall be carried out only after online verification through the common portal.
- 6. All information related to Permanent Account Number, Aadhaar, Director Identification Number, Challan Identification Number shall be validated online by the system and Application Reference Number (ARN) will be generated after successful validation of necessary field.
- 7. Status of the application can be tracked on the common portal.
- 8. No fee is payable for submitting application for amendment.
- 9. Authorised signatory shall not be a minor.

[See rule 19(1)]

Reference Number - << >>

Date-DD/MM/YYYY

To (Name) (Address) Registration Number (GSTIN / UIN)

Application Reference No. (ARN)

Dated - DD/MM/YYYY

#### **Order of Amendment**

This has reference to your application number----- dated ---- regarding amendment in registration particulars. Your application has been examined and the same has been found to be in order. The amended certificate of registration is available on your dashboard for download.

Signature Name Designation Jurisdiction

Date Place

[See rule 20]

# **Application for Cancellation of Registration**

1	GSTIN				
2	Legal name				
3	Trade name, if any				
4	Address of Principal Place of Business				
5	Address for future	Building No./ Flat No.		Floor No.	
	correspondence (including email, mobile telephone,	Name of Premises/ Building	Road/ Street		
	fax )	City/Town/ Village		District	
		Block/Taluka			
		Latitude		Longitude	
		State		PIN Code	
		Mobile (with country code)		Telephone	
		email		Fax Number	
6.	Reasons for Cancellation (Select one)	<ul> <li>Discontinuance /Closure of bus</li> <li>Ceased to be liable to pay tax</li> <li>Transfer of business on accommand a management of the sale, lease or otherwise disperents.</li> <li>Change in constitution of the leading to change in Performance of the sale, lease or otherwise disperents.</li> <li>Change in constitution of the leading to change in Performance of the sale, lease or otherwise disperents.</li> <li>Change in constitution of the leading to change in Performance of the sale, lease or otherwise disperents.</li> <li>Others (specify)</li> </ul>	ount of merger, osed of ousiness manent		
7.	etc.	nerger of business, particulars of regis	tration of entity in	n which merged, amalgan	nated, transferred
(i)	Goods and Services Tax Identification Number				
(ii)	(a) Name (Legal)				
	(b) Trade name, if any				
(iii)	Address of Principal	Building No./ Flat No.		Floor No.	
	Place of Business	Name of Premises/ Building		Road/ Street	
		City/Town/ Village		District	
		Block/Taluka			
	1	1	1		1

	Latitude				Longitude			
	State			PIN Code				
	Mobile (with country	code)		Telephone				
	email				Fax Numb	per		
Date from which regi	stration is to be cancelle	ed.	<dd n<="" td=""><td colspan="5"><dd mm="" yyyy=""></dd></td></dd>	<dd mm="" yyyy=""></dd>				
Particulars of last Ret	urn Filed							
Tax period								
	e Number							
		,						
Amount of tax paregistration.	ayable in respect of in	puts/capital	goods hel	d in stocl	k on the effec	ctive date of	cancellation of	
<b>D</b>		Value of				Payable (which	chever is	
Description		Stock (Rs.)	Central Tax	State Tax	UT Tax	Integrated Tax	Cess	
Inputs		(/)	2 494.1	2 4/1		2 411.1		
	n semi-finished goods							
	nt and machinery							
	·c							
Details of tax paid	<u>, if any </u>							
		Paymen	t from Cash	Ledger				
	T = =	_				T		
Sr. No.	Debit Entry No.	Central Tax	State	Tax	UT Tax	Integrated Tax	Cess	
1.								
2.								
	Sub-Total							
		Paymer	t from ITC	Ledger				
		,		U				
Sr. No.	Debit Entry No.		State	Tax	UT Tax	Integrated Tax	Cess	
1.		1 411	l			1		
2.								
	Sub-Total							
Total Amount of T	ax Paid							
ocuments uploaded		•	1					
erification								
				ein above	is true and cor	rect to the bes	st of my/our	
				Signature	e of Authorise	d Signatory		
			Name	of the Aut	thorised Signa	tory		
			Design	nation / Sta	atus			
	Particulars of last Ret Tax period Application Reference Date Amount of tax paregistration.  Description Inputs Inputs Contained in Capital Goods/Plate Total Details of tax paid  Sr. No.  1. 2.  Total Amount of Tax paid  Cocuments uploaded  erification  hereby solemnly af	State   Mobile (with country email	State  Mobile (with country code)  email  Date from which registration is to be cancelled.  Particulars of last Return Filed Tax period  Application Reference Number  Date  Amount of tax payable in respect of inputs/capital registration.  Value of Stock (Rs.)  Inputs  Inputs Inputs contained in semi-finished goods Inputs contained in finished goods Capital Goods/Plant and machinery Total  Details of tax paid, if any  Paymen  Sr. No. Debit Entry No. Central Tax  1. 2. Sub-Total  Paymen  Sr. No. Debit Entry No. Central Tax  1. 2. Sub-Total  Total Amount of Tax Paid  Pocuments uploaded  Prification  hereby solemnly affirm and declare that the information	State  Mobile (with country code)  email  Date from which registration is to be cancelled.  Particulars of last Return Filed  Tax period  Application Reference Number  Date  Amount of tax payable in respect of inputs/capital goods hel registration.  Value  Obscription  Description  Description  Description  Description  Tax  Inputs  Inputs contained in semi-finished goods  Inputs contained in finished goods  Capital Goods/Plant and machinery  Total  Details of tax paid, if any  Payment from Cash  Sr. No.  Debit Entry No.  Central  Tax  State  1.  2.  Sub-Total  Payment from ITC  Sr. No.  Debit Entry No.  Central  Tax  State  1.  2.  Sub-Total  Payment from ITC  State  1.  2.  Sub-Total  Pocuments uploaded  Prification  hereby solemnly affirm and declare that the information given her ledge and belief and nothing has been concealed therefrom.	State  Mobile (with country code) email  Date from which registration is to be cancelled.  Particulars of last Return Filed  Tax period Application Reference Number Date  Amount of tax payable in respect of inputs/capital goods held in stock registration.  Pescription  Description  Description  Pescription  Description  Description  Description  Pescription  Description  Descript	State   PIN Code   PIN Code   Mobile (with country code)   Telephone   Pax Number   Pax Number   Pax Number   Pax Number   Pax Particulars of last Return Filed   Pax Period   Pax Period	State    Mobile (with country code)	

#### **Instructions for filing of Application for Cancellation**

- A registered person seeking cancellation of his registration shall electronically submit an application including details of closing stock and liability thereon along with relevant documents, on common portal.
- The following persons shall digitally sign application for cancellation, as applicable:

Constitution of Business	Person who can digitally sign the application
Proprietorship	Proprietor
Partnership	Managing / Authorised Partners
Hindu Undivided Family	Karta
Private Limited Company	Managing / Whole-time Directors/ Chief Executive Officer
Public Limited Company	Managing / Whole-time Directors/ Chief Executive Officer
Society/ Club/ Trust/ AOP	Members of Managing Committee
Government Department	Person In charge
Public Sector Undertaking	Managing / Whole-time Directors/ Chief Executive Officer
Unlimited Company	Managing / Whole-time Directors/ Chief Executive Officer
Limited Liability Partnership	Designated Partners
Local Authority	Chief Executive Officer or Equivalent
Statutory Body	Chief Executive Officer or Equivalent
Foreign Company	Authorised Person in India
Foreign Limited Liability Partnership	Authorised Person in India
Others	Person In charge

In case of death of sole proprietor, application shall be made by the legal heir / successor manually before the concerned tax authorities. The new entity in which the applicant proposes to amalgamate itself shall register with the tax authority before submission of the application for cancellation. This application shall be made only after that the new entity is registered.

Before applying for cancellation, please file **your tax return due** for the tax period in which the effective date of surrender of registration falls.

- Status of the Application may be tracked on the common portal.
- No fee is payable for filing application for cancellation.
- After submission of application for cancellation of registration, the registered person shall make payment, if not made at the time of this application, and shall furnish final return as provided in the Act.
- The registered person may also update his contact address and update his mobile number and e mail address.

[See rule 22(1)]

Reference No	<< Date >>
То	
Registration Number (GSTIN/UIN)	
(Name)	
(Address)	
Show Cause Notice for Cancell Whereas on the basis of information which has come to liable to be cancelled for the following reasons: -	e e e e e e e e e e e e e e e e e e e
1	
2 3	
3	
You are hereby directed to furnish a reply to this no of service of this notice.	tice within seven working days from the date
☐ You are hereby directed to appear before the undersigned fail to furnish a reply within the stipulated date appointed date and time, the case will be decided expanmerits	or fail to appear for personal hearing on the
Place:	
Date:	
	Signature
	< Name of the Officer>
	Designation
	Jurisdiction

[See rule 22(2)]

# Reply to the Show Cause Notice issued for cancellation for registration

1.	Reference No. of Notice	Date of issue	
2.	GSTIN / UIN		
3.	Name of business (Legal)		
4.	Trade name, if any		
5.	Reply to the notice		
6.	List of documents uploaded		
7.	Verification  I	hereby solemn rect to the best of	ly affirm and declare that my knowledge and belief
		Signature of A	authorised Signatory
		Nar	me
		Designat	tion/Status
	Place		
	Date		

[See rule 22(3)]

Reference No To Name Address GSTIN / UIN			(//	Date				
Application	Reference No. (AF	RN)	]	Date				
Order for Cancellation of Registration  This has reference to your reply dated in response to the notice to show cause dated  Whereas no reply to notice to show cause has been submitted; or  Whereas on the day fixed for hearing you did not appear; or  Whereas the undersigned has examined your reply and submissions made at the time of hearing and is of the opinion that your registration is liable to be cancelled for following reason(s).  1.  2.  The effective date of cancellation of your registration is < <dd mm="" yyyy="">&gt;.  Determination of amount payable pursuant to cancellation:  Accordingly, the amount payable by you and the computation and basis thereof is as follows:  The amounts determined as being payable above are without prejudice to any amount that may be found to be payable you on submission of final return furnished by you.  You are required to pay the following amounts on or before (date) failing which the amount will be recovered in accordance with the provisions of the Act and rules made thereunder.</dd>								
Head	Central Tax	State Tax	UT Tax	Integrated Tax	Cess			
Tax								
Interest								
Penalty								
Others								
Total								
Place: Date:  Signature  < Name of the Officer> Designation Jurisdiction								

[See rule 22(4)] Date

Reference No. To
Name
Address
GSTIN/UIN

Show Cause Notice No.

Date

# Order for dropping the proceedings for cancellation of registration

This has reference to your reply dated ---- in response to the notice to show cause notice dated DD/MM/YYYY. Upon consideration of your reply and/or submissions made during hearing, the proceedings initiated for cancellation of registration stands vacated due to the following reasons:

<< text >>

Signature
< Name of the Officer>
Designation
Jurisdiction

Place: Date:

[See rule 23(1)]

#### **Application for Revocation of Cancellation of Registration**

1.	GSTIN (cancelled)							
2.	Legal Name							
3.	Trade Name, if any							
4.	Address							
	(Principal place of bus	siness)						
5.	Cancellation Order No	).			Date –			
6	Reason for cancellatio	n					I	
7	Details of last return f	iled						
	Period of Return			Application Reference Number		Date of filin	ng	DD/MM/YYYY
8	Reasons for revocation cancellation	n of	Re	asons in brief. (Deta	iled reaso	oning can be	filed as	an attachment)
9	Upload Documents							
10.	Verification							
	I hereby solemnly affi my knowledge and be					above is tru	e and co	orrect to the best of
	Signature of Authorised Signatory Full Name							
						(fir		e, middle, surname) Designation/Status
	Place							S
	Date							

#### Instructions for submission of application for revocation of cancellation of registration

- A person, whose registration is cancelled by the proper officer on his own motion, may apply for revocation of cancellation of registration, within thirty days from the date of service of the order of cancellation of registration at the common portal No application for revocation shall be submitted if the registration has been cancelled for the failure to furnish returns unless such returns are furnished and any amount due as tax in terms of such returns has been paid along with any amount payable towards interest, penalty and late fee payable in respect of the said returns.
- Any change in the mobile number or the e-mail address of authorised signatory submitted as amended from time to time, shall be carried out only after online verification through the common portal in the manner provided
- Status of the application can be tracked on the common portal.
- No fee is payable for filing application for revocation of cancellation.

[See rule 23(2] Date

Reference No. -

To GSTIN / UIN (Name of Taxpayer) (Address)

Application Reference No. (ARN)

Date

#### Order for revocation of cancellation of registration

This has reference to your application dated DD/MM/YYYY for revocation of cancellation of registration. Your application has been examined and the same has been found to be in order. Accordingly, your registration is restored.

Signature Name of Proper officer (Designation) Jurisdiction –

Date Place

[See rule 23(3)]

Reference Number:	Date
To Name of the Applicant/Taxpayer Address of the Applicant/Taxpayer GSTIN Application Reference No. (ARN):	Dated
Show Cause Notice for rejection of applic	eation for revocation of cancellation of registration
* **	DD/MM/YYYY regarding revocation of cancellation of ad the same is liable to be rejected for the following reasons:
☐ You are hereby directed to furnish a reply to the of this notice.	is notice within seven working days from the date of service
☐ You are hereby directed to appear before the use If you fail to furnish a reply within the stipulated date and time, the case will be decided ex parte on the case will be decided exparte on the case will be	y or you fail to appear for personal hearing on the appointed
	Jurisdiction

[See rule 23(3)]

# Reply to the notice for rejection of application for revocation of cancellation of registration

1.	Reference No. of Notice		Date	
2.	Application Reference No. (ARN)		Date	
3.	GSTIN, if applicable			
4.	Information/reasons			
5.	List of documents filed			
6.	Verification			
	Ithe information given hereinabo and nothing has been concealed	ve is true and correct to		affirm and declare that ar knowledge and belief
			Signature of	of Authorised Signatory
				Name
	Place		<b>D</b>	
	Date		De	signation/Status



[See rule 24(1)]

# **Certificate of Provisional Registration**

1.	Provisio	nal ID			
2.	Permane Number	nt Account			
3.	Legal Na	ame			
4.	Trade N	ame			
5.	Registration Details under Existing Law				
	Act			Registration Nur	mber
(a)					
(b)					
(c)					
Date	<date certificate="" creation="" of=""></date>		Place	<state></state>	

This is a Certificate of Provisional Registration issued under the provisions of the Act.

[See rule 24(2)]

	Application for Enrolment of Existing Taxpayer					
Taxpay	er Details					
1. Prov	visional ID					
	l Name (As per Permanent at Number)					
3. Lega	l Name (As per State/Center					
4. Trac	le Name, if any					
5. Perm Busines	nanent Account Number of					
6. Cons	titution					
7. State	;					
7A Secapplica	tor, Circle, Ward, etc. as ble					
7B. Cei	nter Jurisdiction					
8. Reas Registra	on of liability to obtain ation	Registration under ear	rlier law			
9. Exist	ting Registrations					
Sr. No.	Type of Registration		Registration Number	Date of Registration		
1	TIN Under Value Added	Tax				
2	Central Sales Tax Registr	ration Number				
3	Entry Tax Registration N	umber				
4	Entertainment Tax Regis	tration Number				
5	Hotel And Luxury Tax R	egistration Number				
6	Central Excise Registrati	on Number				
7	Service Tax Registration	Number				
8	Corporate Identify Numb Registration	er/Foreign Company				
9	Limited Liability Partner Number/Foreign Limited Identification Number					
10	Import/Exporter Code Nu	ımber				
11	Registration Under Duty Medicinal And Toiletry					
12	Others (Please specify)					

10. Details of	Principal Place of B	usiness						
Building No. /	Flat No.				Floor No			
Name of the P	remises/Building			Road/Street				
Locality/Villa	ge				District			
State					PIN Code			
Latitude					Longitude			
Contact Inform	nation	l						
Office Email	Address				Office-Telephone Nu	mber		
Mobile Numb	er				Office Fax No			
10A. Nature o	f Possession of Pren	nises	(Own; l	Leased	l; Rented; Consent; Sha	ared)	<u> </u>	
10B. Nature o	f Business Activities	s being carri	ed out					
Factory / Man	ufacturing O	Wholesale	e Busines:	s O	Retail Business	Wai	rehouse/Depot	0
Bonded Warel	house	Service Pi	rovision	0	Office/Sale Office	Lea	sing Business	0
Service Recip	ient	EOU/ STI	P/ EHTP	0	SEZ	Inpu	ut Service Distri	butor (ISD)
Works Contra	ct	Others (S <sub>1</sub>	pecify)	0				
11. Details of	Additional Places of	Business						
Building No/F	Flat No				Floor No			
Name of the P	remises/Building				Road/Street			
Locality/Villa	ge				District			
State					PIN Code			
Latitude (Opti	onal)				Longitude(Optional)			
Contact Inforr	nation	l					1	
Office Email A	Address			Offic	ce Telephone Number			
Mobile Numb	er			Offic	ce Fax No			
11A.Nature of	Possession of Prem	ises	(Own;	Lease	ed; Rented; Consent; S	hared)	I	
11B.Nature of	Business Activities	being carrie	ed out					
Factory / Man	ufacturing	Wholesale	e Busines:	s	Retail Business		Warehouse/Depot	
Bonded Warel	house	Service Provision		Office/Sale Office Le		Leasing Business		
Service Recip	ient O	EOU/ STP/ EHTP		SEZ	Inpu	Input Service Distributor (ISD)		
Works Contra	ct	Others (Specify)						
Add More		·						
12. Details of	Goods/ Services sup	pplied by th	e Busines	SS				
Sr. No.	Description of Goo	ods					HSN Code	

Sr. No.	Description of Serv	Description of Services							HSN C	ode	
13. Total Bar	nk Accounts maintain	ed by y	ou for conduc	cting E	Business						
Sr. No.	Account Number	Type	of Account	IFSO	C	Ва	ank Nam	e	Bran	ch A	ldress
	of Proprietor/all Pa of Associations/Board			ng Di	irectors and	l w	hole tim	ne Dire	ctor/Me	ember	rs of Managing
Name		<firs< td=""><td>t Name&gt;</td><td><mi< td=""><td>ddle Name</td><td>&gt;</td><td></td><td><last< td=""><td>Name&gt;</td><td></td><td><photo></photo></td></last<></td></mi<></td></firs<>	t Name>	<mi< td=""><td>ddle Name</td><td>&gt;</td><td></td><td><last< td=""><td>Name&gt;</td><td></td><td><photo></photo></td></last<></td></mi<>	ddle Name	>		<last< td=""><td>Name&gt;</td><td></td><td><photo></photo></td></last<>	Name>		<photo></photo>
Name of Fat	her/Husband	<firs< td=""><td>t Name&gt;</td><td><mi< td=""><td>ddle Name</td><td>&gt;</td><td></td><td><last< td=""><td>Name&gt;</td><td></td><td><p11010></p11010></td></last<></td></mi<></td></firs<>	t Name>	<mi< td=""><td>ddle Name</td><td>&gt;</td><td></td><td><last< td=""><td>Name&gt;</td><td></td><td><p11010></p11010></td></last<></td></mi<>	ddle Name	>		<last< td=""><td>Name&gt;</td><td></td><td><p11010></p11010></td></last<>	Name>		<p11010></p11010>
Date of Birth	DD/ MM/ YYYY	Gend	er	1		<	Male, Fe	emale, (	Other>		
Mobile Num	lber			Ema	ail Address	ı					
Telephone N	lumber										
Identity Info	rmation			<u> </u>							
Designation		Direc	tor Identificat	ion N	umber						
Permanent Account Number		Aadh	aar Number								
Are you a cit	tizen of India?		<yes no=""></yes>		Passport 1	Nun	nber				
Residential A	Address		1					I_			
Building No.	/Flat No				Floor No						
Name of the	Premises/Building			Road/Street							
Locality/Vill	lage			District							
State					PIN Code	N Code					
15. Details o	of Primary Authorised	Signate	ory		·			I.			
Name		<firs< td=""><td>t Name&gt;</td><td><mi< td=""><td>ddle Name</td><td>&gt;</td><td></td><td><last< td=""><td>Name&gt;</td><td></td><td></td></last<></td></mi<></td></firs<>	t Name>	<mi< td=""><td>ddle Name</td><td>&gt;</td><td></td><td><last< td=""><td>Name&gt;</td><td></td><td></td></last<></td></mi<>	ddle Name	>		<last< td=""><td>Name&gt;</td><td></td><td></td></last<>	Name>		
Name of Fat	her/Husband	<first name=""></first>		<middle name=""></middle>		<last name=""></last>		•			
Date of Birth	1	DD / MM / YYYY		Gender <ma< td=""><td><male,< td=""><td colspan="2"><male, female,="" other=""></male,></td><td>·&gt;</td><td><photo></photo></td></male,<></td></ma<>		<male,< td=""><td colspan="2"><male, female,="" other=""></male,></td><td>·&gt;</td><td><photo></photo></td></male,<>	<male, female,="" other=""></male,>		·>	<photo></photo>	
Mobile Num	lber			Email Address							
Telephone N	lumber			ı							
Identity Info	rmation										
Designation				Dire	ector Identif	icat	ion Num	ber			

				1
Permanent Account Number		Aadhaar Number		
Are you a citizen of India?	<yes no=""></yes>	Passport Nu	umber	
Residential Address			·	
Building No/Flat No		Floor No		
Name of the Premises/Building		Road/Street	t	
Locality/Village		District		
State		PIN Code		
Add More		<u> </u>	·	
A customized list of documents required provision to upload relevant docum  16. Aadhaar Verification				e auto-populated with
I on behalf of the holders of Aadha to obtain details from UIDAI for that identity information would of Central Identities Data Repository	the purpose of authority be used for val	entication. "Goods lidating identity of	and Services Tax Netwo	ork" has informed me
17. Declaration				
I, hereby solemnly affirm and de knowledge and belief and nothing			above is true and corre	ect to the best of my
			Digit	tal Signature/E-Sign
Name of the Authorised Signatory			Place	
Designation of Authorised Signatory		]	Date	

### Instructions for filing of Application for enrolment

- 1. Every person, other than a person deducting tax at source or an Input Service Distributor, registered under an existing law and having a Permanent Account Number issued under the Income-tax Act, 1961 (Act 43 of 1961) shall enroll on the common portal by validating his e-mail address and mobile number
- 2. Upon enrolment under clause (a), the said person shall be granted registration on a provisional basis and a certificate of registration in **FORM GST REG-25**, incorporating the Goods and Services Tax Identification Number therein, shall be made available to him on the common portal:
- 3. Authorisation Form:-

For each Authorised Signatory mentioned in the application form, Authorisation or copy of Resolution of the Managing Committee or Board of Directors to be filed in the following format:

Declaration for Authorised Signatory (Separate for each signatory)

I ---

(Details of Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc)

1. << Name of the Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc>>

2.

3.

hereby solemnly affirm and declare that << name of the authorised signatory>> to act as an authorised signatory for the business << Goods and Services Tax Identification Number - Name of the Business>> for which application for registration is being filed/ is registered under the Gujarat Goods and Service Tax Act, 2017.

All his actions in relation to this business will be binding on me/ us.

Full Name

Signatures of the persons who are Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc.

Designation/Status Signature

Designation/Status

	$\mathcal{C}$	$\mathcal{E}$			
1.					
2.					
Acceptance as an authorised signatory					
I <<(Name of the authorised signatory>> he signatory for the above referred business and all	•	•	•	act a	s authorised
Signatory			Signature	of	Authorised

S. No.

Date Place

#### Instructions for filing online form

- Enter your Provisional ID and password as provided by the State/Commercial Tax/Central Excise/Service Tax Department for log in on the GST Portal.
- Correct Email address and Mobile number of the Primary Authorised Signatory are to be provided. The Email address and Mobile Number would be filled as contact information of the Primary Authorised Signatory.
- E mail and Mobile number to be verified by separate One Time Passwords. Taxpayer shall change his user id and password after first login.
- Taxpayer shall require to fill the information required in the application form related details of Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees, Principal Place of Business and details in respect of Authorised signatories.
- Information related to additional place of business, Bank account, commodity in respect of goods and services dealt in (top five) are also required to be filled.
- Applicant need to upload scanned copy of the declaration signed by the Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc. in case he/she declares a person as Authorised Signatory as per Annexure specified. Documents required to be uploaded as evidence are as follows:-

	1.	Photographs wherever specified in the Application Form (maximum 10)
		Proprietary Concern – Proprietor
		Partnership Firm / Limited Liability Partnership – Managing/ Authorised
		Partners (personal details of all partners is to be submitted but photos of only ten partners including
		that of Managing Partner is to be submitted)
		Hindu Undivided Family – Karta
L		Company – Managing Director or the Authorised Person

	Trust – Managing Trustee Association of Person or Body of Individual –Members of Managing Committee (personal details of all members is to be submitted but photos of only ten members including that of Chairman is to be submitted) Local Body – Chief Executive Officer or his equivalent Statutory Body – Chief Executive Officer or his equivalent Others – Person in Charge
2.	Constitution of business: Partnership Deed in case of Partnership Firm, Registration Certificate/Proof of Constitution in case of Society, Trust, Club, Government Department, Association of Person or Body of Individual, Local Authority, Statutory Body and Others etc.
3.	Proof of Principal/Additional Place of Business:  (a) For Own premises —  Any document in support of the ownership of the premises like Latest Property Tax Receipt or Municipal Khata copy or copy of Electricity Bill.  (b) For Rented or Leased premises —  A copy of the valid Rent / Lease Agreement with any document in support of the ownership of the premises of the Lessor like Latest Property Tax Receipt or Municipal Khata copy or copy of Electricity Bill.  (c) For premises not covered in (a) and (b) above —  A copy of the Consent Letter with any document in support of the ownership of the premises of the Consenter like Municipal Khata copy or Electricity Bill copy. For shared properties also, the same documents may be uploaded.
4	Bank Account Related Proof: Scanned copy of the first page of Bank passbook / one page of Bank Statement Opening page of the Bank Passbook held in the name of the Proprietor / Business Concern – containing the Account No., Name of the Account Holder, MICR and IFSC and Branch details.
5	For each Authorised Signatory: Letter of Authorisation or copy of Resolution of the Managing Committee or Board of Directors to that effect as specified.

• After submitting information electronic signature shall be required. Following person can electronically sign application for enrolment:-

Constitution of Business	Person who can digitally sign the application
Proprietorship	Proprietor
Partnership	Managing / Authorised Partners
Hindu Undivided Family	Karta
Private Limited Company	Managing / Whole-time Directors and Managing Director/Whole Time Director/ Chief Executive Officer
Public Limited Company	Managing / Whole-time Directors and Managing Director/Whole Time Director/ Chief Executive Officer
Society/ Club/ Trust/ AOP	Members of Managing Committee
Government Department	Person In charge
Public Sector Undertaking	Managing / Whole-time Director and Managing Director/Whole Time Director/ Chief Executive Officer
Unlimited Company	Managing/ Whole-time Director and Managing Director/Whole Time Director/ Chief Executive

	Officer
Limilted Liability Partnership	Designated Partners
Local Authority	Chief Executive Officer or Equivalent
Statutory Body	Chief Executive Officer or Equivalent
Foreign Company	Authorised Person in India
Foreign Limited Liability Partnership	Authorised Person in India
Others	Person In charge

Application is required to be mandatorily digitally signed as per following:

Sl. No	Type of Applicant	Digital Signature required
1.	Private Limited Company Public Limited Company Public Sector Undertaking Unlimited Company Limited Liability Partnership Foreign Company Foreign Limited Liability Partnership	Digital Signature Certificate(DSC) Class 2 and above
2.	Other than above	Digital Signature Certificate class 2 and above e-Signature

Note:- 1. Applicant shall require to register their DSC on common portal.

2. e-Signature facility will be available on the common portal for Aadhar holders.

All information related to Permanent Account Number, Aadhaar, Director Identification Number, Challan Identification Number, Limited Liability Partnership Identification Number shall be online validated by the system and Acknowledgment Reference Number will be generated after successful validation of all the filled up information.

Status of the online filed Application can be tracked on the common portal.

- 1. Authorised signatory should not be minor.
- 2. No fee is applicable for filing application for enrolment.

#### Acknowledgement

Enrolment Application - Form GST- has been filed against Application Reference Number (ARN) <.....>.

Form Number : <.....>

Form Description: <Application for Enrolment of Existing Taxpayers>

Date of Filing : <DD/MM/YYYY>

Taxpayer Trade Name : <Trade Name>

Taxpayer Legal Name : <Legal Name as shared by State/Center>

Provisional ID Number : <Provisional ID Number>

It is a system generated acknowledgement and does not require any signature

[See rule -24(3)]

Reference No.	< <date-dd mm="" yyyy="">&gt;</date-dd>
То	
Provisional ID	
Name	
Address	

Application Reference Number (ARN) < >

Dated < DD/MM/YYYY>

#### Show Cause Notice for cancellation of provisional registration

This has reference to your application dated -----. The application has been examined and the same has not been found to be satisfactory for the following reasons:-

2

You are hereby directed to show cause as to why the provisional registration granted to you shall not be cancelled.

Signature

Name of the Proper Officer Designation Jurisdiction

Date Place

[See rule 24(3)]

Reference No		_	<< Date–DD/	MM/YYYY>>	
To Name Address GSTIN / Provisional	ID				
This has reference to Whereas no rep	Application Reference No. (ARN)  Order for cancellation of provisional registration  This has reference to your reply dated in response to the notice to show cause dated  Whereas no reply to notice to show cause has been submitted; or				
Whereas on the day fixed for hearing you did not appear; or Whereas the undersigned has examined your reply and submissions made at the time of hearing, and is of the opinion that your provisional registration is liable to be cancelled for following reason(s).  1. 2.					
<u>Determination of amount payable pursuant to cancellation of provisional registration:</u> Accordingly, the amount payable by you and the computation and basis thereof is as follows:					
You are required to					
will be recovered in accordance with the provisions of the Act and rules made thereunder.					
Head	Central Tax	State Tax	UT Tax	Integrated Tax	Cess
Tax					
Interest					
Penalty					
Others					
Total					
Place: Date:				De	Signature e of the Officer> esignation urisdiction

[See rule 24(4)]

# Application for cancellation of provisional registration Part A

(i) Provisional ID				
(ii) Email ID				
(iii) Mobile Number				
		Pa	rt B	
Legal Name (As per Number)	Permanent Account			
2. Address for correspon	dence			
Building No./ Flat No.			Floor No.	
Name of Premises/ Building			Road/ Street	
City/Town/ Village/Locality			District	
Block/Taluka				
State			PIN	
3. Reason for Cancellation	n			
4. Have you issued any ta	ax invoice during GST	regime?	YES NO	
5. Declaration (i) I <name authorised="" karta="" of="" proprietor="" signatory="" the="">, being <designation> of <legal ()="" name=""> do</legal></designation></name>				
hereby declare that I	am not liable to registr	ation und	er the provisions of the Act.	
6. Verification				
I < > hereby solemnly aft my knowledge and belief			ation given herein above is true and.	nd correct to the best of
Aadhaar Number	Permanent Account Number			
Signature of Authorised Signatory				
Full Name				
Designation / Status				
Place				
Date			DD/MM/YYYY	

[See rule 25]

Form for Field Visit Report Center Jurisdiction (Ward/Circle/Zone)

Name of the Officer:- << to be prefilled>>		
Date of Submission of Report:-		
Name of the taxable person		
GSTIN/UIN –		
Task Assigned by:- < Name of the Authority- to be prefilled>		
Date and Time of Assignment of task:- < System date and time>		

Sr. No.	Particulars	Input	
1.	Date of Visit		
2.	Time of Visit		
3.	Location details :		
3.	Latitude	Longitude	
	North – Bounded By	South – Bounded By	
	West – Bounded By	East – Bounded By	
4	Whether address is same as mentioned in	Y/N	
4.	application.		
5.	Particulars of the person available at the		
٥.	time of visit		
(i)	Name		
(ii)	Father's Name		
(iii)	Residential Address		
(iv)	Mobile Number		
(v)	Designation / Status		
(vi)	Relationship with taxable person, 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.	Documents verified	Yes/No	
9.	Upload photograph of the place with the poverification is conducted.	erson who is present at the place where site	
10	Comments (not more than < 1000 characters>		
10.	,	Signature	
	Place:	Name of the Officer:	
	Date:	Designation:	
		Jurisdiction:	

By order and in the name of the Governor of Gujarat,

Joint Secretary to Government