APPLICATION FORM FOR ONLINE REGISTRATION

FORM NO 1

- District (Select from List of Districts)
- Registration Office (List of Offices within the district)
- Type of Registration: VAT / Presumptive /

Government Department / Bank / Parcel,

Transporting, Lease Wagon Agency / Casual Trader

- 1. Full name of Applicant Dealer (for individuals first name, middle name, last name initials at the end):
- 2. Date of Birth of the Applicant (DD/MM/YYYY):
- 3. Trade Name (no salutation):
- 4. Principal Place of Business
 - a. Building Name:
 - b. Building No:
 - c. Occupancy Status: Rental / Owned
 - d. Panchayat/Municipality/Corporation : Description:

e. Ward No:

- f. Place Name:
- g. Post Office:

- h. Pincode:
- i. Whether invoices are issued from the premises: (Y/N)

Photograph to

be affixed after downloading

the filled up

application

online

- j. Telephone Number:
- k. Mobile Number:
- I. Fax No.
- m. E-Mail ID:
- n. Website
- 5. Details of Branches (if any): (furnish details a to k above)
- 6. Details of Godowns (if any): (furnish details a to k above)
- 7. Details of Sister Concerns (if any): (furnish details a to k above + TIN)
- 8. Details of Branch Business outside the State: (furnish details a to k above + TIN)
- 9. Permanent Address for Communication (Residential): (Details a to k)
- 10. Constitution of business : (for options c,d,e, furnish residential address, bank details and PAN separately)
 - a. Proprietorship
 - b. Partnership Firm
 - c. Limited Liability Partnership
 - d. Company
 - e. Society
 - f. Local Authority
 - g. Public Sector Undertaking

- h. Central Government Department
- i. State Government Department
- j. Autonomous Body
- k. Bank
- I. Others (specify)

(Date of Incorporation to be specified except for proprietorship)

- 11. Nature of Business
 - a. Trader
 - b. Manufacturer (Details of unit)
 - c. Service Sector
 - d. Works Contract
 - e. Job work
 - f. Right to use

- g. Awarder
- h. Casual Trader
- i. Auctioneer
- j. Government Contractor
- k. Others (specify)
- 12. Permanent Account Number of the applicant dealer (PAN):

(mandatory field, if no PAN applicant has to certify that he/she does not have a PAN)

- 13. Aadhaar UID Number (if any):
- 14. License issued by Local Bodies.
 - a) License / Permit number: b) Name of the issuing authority:
- 15. License issued by other Departments.
 - a. License / Registration No:
 - b. Name of the Authority:
- 16. Commodities Dealt with:

17. Annual turnover for the immediate preceding18. Expected turnover during the year: Rs.19. Date of commencement of business:20. Whether registration under CST Act require	
a. Interstate Purchases [Sec 7(1)]	: Yes / No
b. Interstate Sales [Sec 7(2)]: Yes	/ No
21. Details of Bank Account (All refunds from the Department will be credited to this account)	
a. Name of the Bank:	d. Account Number:
b. Name of the branch:	e. Nature of Account:
c. MICR Number:	
22. Details of security furnished (as per the rate prescribed)	
23. Name and address of the Manager, if appoi	
a. Name	f. Post Office
b. Building name	g. Pin code h. E-mail Id
c. Building Number d. Area / Road	i. Telephone Number
e. Locality	j. Mobile
k. Number	j. Mobilo
24. Name and address of the Power of Attorney holder	
a. Name	f. Post Office
b. Building name	g. Pin code
c. Building Number	h. E-mail Id
d. Area / Road	i. Telephone Number
e. Locality	j. Mobile Number
25. Details of Registration Fee paid.	
	gnature of the Applicant
Date:	Designation / Status:
Date:	Designation / Otatus.