

Commercial Tax Department

FORM-A APPLICATION FOR REGISTRATION AS DEALER

[See rule 3(2)]

PHOTO

To

The Registering Authority _____

1. NAME OF THE BUSINESS

2. Address :

a. Principal place of business

b. Branch

c. Factory

d. Godown

Building Name	Door No.	Street / Road	Village / Commune / City	PIN

3. Address of the Head Office outside the State

4. Constitution

Proprietor	
Partnership	
Private Limited Company	
Public Limited Company	
HUF	
Co-operative Society	
Government Undertaking	
Others	

5. Business Transaction

Customs Registration BIN	
Industry Regn. No./SSI/MSI/LSI No.	
Central Excise Regn. No.	
Registrar of Company's CIN	
Property Tax Assessment no., if any	
Income Tax PAN	
Director General of Foreign Trade's I.E.C.	
Name of the Bank and Account no.	

6. Probable / Date of commencement of business :

7. Details of the Proprietor / Partners / Directors, etc.

Name	Age	Name of Father	Status	Present Address	Permanent address	Extent of share or interest in business
(1)	(2)	(3)	(4)	(5)	(6)	(7)

Bank where account is available with Bank Code	Bank Account No.	PAN	Passport No.	Ration Card No.	Voter ID No.	Signature
(8)	(9)	(10)	(11)	(12)	(13)	(14)

8. Telephone No.

9. Fax No.

10. E-Mail ID

11. Web site:

12. Nature of Business

Manufacture	
Wholesale	
Retail	
Export/Import	
Hire Purchase	

Works Contract	
Leasing	
Hotels	
Food & Drink	
Others	

13. Turnover on the date of this application

14. Main commodities dealt / to be dealt

1.
2.

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15. Sources of purchase :

Within the State	Inter-State	Import from outside the country
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16. Details of immovable property, if any, for:

	Location	Survey No.	Extent of land / area	Registration Doc. No. & Year	Registration jurisdiction
(i) Business					
(ii) Proprietor/ Partner/ Director					

17. **Reference of Trade Association or two respectable persons /business in the applicant's area

	Name of the business	Address	Name of the person recommending	Status	TIN	Signature with seal
1						
2						

** The details required in column 17 need not be furnished by the dealers whose registration is in force under the PGST Act,1967.

18. Payment details of registration fee:

Amount	DD/ Crossed cheque / Banker's cheque No. / Cash Receipt No*.	Date	Name of the Bank	Branch code

* if paid at cash counter in the department premises.

DECLARATION

I / We _____ S/o _____ do hereby declare that the particulars furnished above in the application are true, correct and complete to the best of my knowledge and belief.

Place:
Date :

Signature of the applicant :
Name and Designation / Status
and Relationship to the dealer
with seal