**Department of Trade and Taxes**

 **Government of NCT of Delhi**

 **Form – DP-1**

 **Dealer profile**

1. A. TIN

B. Full Name of Dealer (Business Name)

 C. Ward no.

 D. Date of Current registration (DD/MM/YYYY)

2. Nature of Business

3. Constitution of the Business.

4. A. Whether opted for composition scheme under section 16 of the Act

 B. Rate of Tax under Composition Scheme

5. Annual turnover category

 A. Type of registration-mandatory/voluntary?

 B. Turnover in preceding year

 C. Whether dealt in only intrastate sales/purchases transactions during.

 (1) 2010-11

 (2) 2011-12

 (3) 2012-13

 D. Expected Turnover in 2013-14

 E. Would you deal in interstate transactions or imports/exports in 2013-14?

6. A. PAN:

 B. If the name on PAN card is different from 18,

 (1) then name on PAN card:

 (2) PAN

 C. if the dealer is a proprietorship concern

 (1) the name of the proprietor

 (2) Proprietor’s PAN

7. Registration No., if registered

|  |  |  |
| --- | --- | --- |
| Sl no | Department | Registration number |
| 1 | Central Excise |  |
| 2 | Service Tax |  |
| 3 | IEC |  |

8. Address of Principal Place of Business (to be used for service of physical notice, if any)

 Address:

 Email ID

 Mobile Number

 Fax number

 Area in Sq. Mts (open)

 Area in Sq. Mts (covered)

9. List of additional places of business within delhi and outside delhi:

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Sl No. | Address | Date of Establishment | Ward number As perAddress In case of branch in delhi | TIN in case of branch outside Delhi | Nature of use viz. shop/godown/accounts office etc.  | Approx area in Square feetOp covEn ere d | Floor viz. Basement ground/1/11Etc ((-1/0/1/2….) | Whether any other firm functioning from same address Y/N | If Yes, TIN and ward of all such business |

10. List of all Bank Accounts

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sl No | Account NO. | Bank | Branch | IFSC Code |
|  |  |  |  |  |

11. Address of third party Storage facility being used in Delhi or outside (for Delhi stocks); if any;

|  |
| --- |
|  |

 12. Exhaustive list of commodities sold/purchased in last year

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sl No. | Name of commodities with commodity code | Rate of Tax under DVAT  | % of GTO in preceding year | Net tax contribution in last FY |
|  |  |  |  |  |

13. Security/ Surety, if any, valid with DTT

|  |  |  |  |
| --- | --- | --- | --- |
| Type of Security | Security Description | Amount | Date of expiry of Security, if in the shape of bank guarantee |
|  |  |  |  |

14. List of Managers

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Sl No. | Name | Date of Birth | Father’s Name | Address | Aadhar | PAN |
|  |  |  |  |  |  |  |

15. Particulars of persons (proprietor/Karta/partners/directors in the business/members of executive committee of societies, clubs etc.) having interest in business and Authorized signatories.

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Sl no. | Name | Gender | Date of Birth | Father’s/husband’s name | Resedential/permanent Address | Passport no. | Aadhaar No. | PAN | Whether authorised signatory YES/NO | Name ,address and TIN of other business where interest held, if any | Status in that other business |

16. Counsel Details

|  |  |  |  |
| --- | --- | --- | --- |
| Counsel Name | First Name | Middle Name | Surname |
| Counsel mobile no. |  |  |  |
| Counsel email id |  |  |  |
| Advocate/ CA/STP |  |  |  |

17.

|  |
| --- |
| VerificationI/We ……………………………..hereby solemnly affirm and declare that the information given here in above is true and correct to the best of my/our knowledge and belief and nothing has been concealed there from.Signature of AuthorizedSignatory …………………………………………………………………………………………Full Name (first, middle,Surname) ………………………………………………………………………………………….Designation / Status ………………………………………………………………………………………….. |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Place |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Date |  |  |  |
|  |  Day |  Month |  Year |