Form VAT 2

Amendment of VAT/CoT Registration Details

New Registration		4	Amer	ıd Regist	ration			
			<u>- </u>					-
1. T	IN							
2. [ocu	ment Control No.						
			Part - "A" (V	'RN A	Allocatio	on)		
3.	Na	me of the Applicant*	Sur Name				Given Name	
4.	Tra	ading Name*						
			Business	s Add	ress :			
5		Number & Street						
6		Area or Locality						
7		Village / Town/City						
8		District	9. PIN Cod	е				
Contact Numbers :								
10		Telephone *						
11		Mobile *						
12		Fax *						
13		Email *						
14		Business Status						
15		Father's/Husband's Name						
16		PAN						
17		Date of Birth (dd/mm/yyyy)						

18	Sex (M or F)	
19	Specimen Signature *:	1
20	2" X 2"Latest Photograph	

Part - "B (VRN Allocation)

Residential Address:

21	Number & Street	
22	Area or Locality	
23	Village / Town/City	
24	District	
25	State	
26	PIN Code	
27	Country	

28	Name of the Statutory Authority *	
29	Number	

Business Details

30	Type of Business*	
31	1 st Major Commodity Traded/Manufactured	
32	Code : CTD to complete	
33	2 nd Major Commodity Traded/Manufactured	
34	Code : CTD to complete	
35	Date of commencement of business* (dd/mm/yyyy)	
36	Tick one of :	

	Turnover for the last Financial Year	Taxable Turno year	over for a	Taxable Turnover for the month	
37	Turnover Amount				
38	Do you wish to apply for/continue registration under CST act ?			No	
39	Do you wish to register for VAT or Composition TAX ? *		VAT :	CoT:	
Additional Information : Tick each box where relevant else leave blank					
40.	Do you use computerised accounts?				
41.	Are you a regular Importer ?				
42.	Are you a regular Exporter * ?				
43.	Will you make exempt sales ? *				
Bank Details					
44	Bank & Branch				
45	Bank Code				
46	Account Number				
Note : If addit	Note: If additional places of business, godowns etc.Complete Form 5a for details				

If a Partnership : Complete **Form 5b** for Partner Details

If others can sign on your behalf Complete Form 5c for authorized signatory

Affidavit:

I apply for registration under VAT and declare that the details furnished above are true and correct to the best of my knowledge / I am aware that there are penalties for making false declarations :

Signature :

Status:

Part "C" Official Use Only :			
49	Date of Receipt : (dd/mm/yyyy)		
50	Reg Type		
51	VAT or CoT ?		
51	VAT or CoT ?		

Security Deposit Type :

54	(blank if none)	
55	Amount	
56	Drawn On	
57	Expiry Date (dd/mm/yyyy)	
58	Free Format text box for notes:	
59	Processed by : Officer Code :	



47. Name*

48. Date:

52

53

EDR (dd/mm/yyyy)

Description

Local VAT Office (LVO) code