

**GOVERNMENT OF ANDHRA PRADESH
COMMERCIAL TAXES DEPARTMENT**

FORM TOT 053

NOTIFICATION OF AMENDED TOT REGISTRATION CERTIFICATE

Date Month Year

--	--	--

01. Tax Office Address: _____ _____ _____
--

02	GRN				
----	-----	--	--	--	--

03. Name : _____ Address: _____ _____ _____
--

Your change of address / change of legal status has been recorded and I enclose herewith an amended TOT Registration Certificate

You must continue to file TOT Quarterly returns and pay the due taxes.

**ASST. COMMERCIAL TAX OFFICER,
TOT REGISTERING AUTHORITY,
_____ CIRCLE.**