THE ASSAM VALUE ADDED TAX RULES, 2005 FORM-4 [See Rule 13(13)]

APPLICATION FOR GENERAL REGISTRATION NUMBER (GRN)

To The I	Prescri	bed Authori	ty,												F	ix Pa Siz Photo Applio	oof	rt
I	ing o	n business	whos	se partic	ulars	are g	given	belo	ow, 1									
01. N	lame a	and style of	the bus	siness.														
02. F	ull add	dress of plac	e of b	usiness.														
		ng name/No																
		Road																
_		ty/Market																
_	Pin C									1								ı
	E-mai																	
		none No.																
L.	Fax N	umber																
	3. Status of business (Put tick mark where Sole proprietorship Association				iation	n of person Co-operative Society *						*						
-	Partne	rsnip		Private	e Lta.	d. Co. Government Enterprise												
-	HUF			Public	Ltd.	Co. Other												
*(To	be spe	ecified if not	cover	ed by an	y of tl	he give	en des	cript	ions)	•								
04. N	lature	of principle	busine	ess activit	ties (F	ut tick	c mark	wh	ere ap	plica	able)	•						
	Mai	nufacturing		Exporte	r	Imp	orter		Dis	tribut	tor	С	&F Ag	gent	,		olesel Stocl	
	R	Retailer Works contractor			Leasing			Hotel			Hire purchase				Other (Specify)			
05. N	lame o	of the princip	ole cor	nmoditie	s.			1										
06. C)ccupa	ncy status (Put tic	ek mark v	where	applic	cable).	,										
		Owned		Rente	d	L		Rent free			Other (Specify)							
			1			1									ļ	l		

07. Name and address of the Proprietor/Managing Partner/Karta/Managing Director.

1 (642110			1											
Father's/Husband														
Name														
Building name/No.														
Area/Road														
Locality/Market														
Pin Code								•	•	•	•	•	•	
E-mail ID														
Telephone No.														
Fax Number														
 Additional places of t 	ousin	ess/w	areho	ouse/	godo	wn								
· · · · · · · · · · · · · · · · · · ·														

09. Date of Commencement of business

D	D	-	M	M	-	Y	Y	Y	Y

10. Date of liability.

Name

D	D	-	M	M	-	Y	Y	Y	Y

- 11. Actual turnover of the year upto the date of submission of the application (with details of each category):
- 12. The estimated turnover for the year in which the application is submitted (furnish details, if any):

13. Income Tax Permanent Account No. (PAN), if any:

14. Details of Bank Account(s).

Name of Bank with address	Type of account	Account number

- 15. The language in which the accounts are maintained:
- 16. Do you use a computer for accounting? (Yes/No):

DECLARATION

- (i) I/We do hereby undertake to pay the tax and file the return in the prescribed form in accordance with the provisions of the Assam Value Added Tax Rules, 2005 pertaining to the entire business conducted at my/our various places of business in accordance with the provisions of the Act and the rules made thereunder.
- (ii) That a sign board in the name of my/our business has already been displayed at all the said business premises.
- (iii) That the books of accounts in respect of the said business are being maintained and shall be found at the said business premises.

I/We	_do	hereby	solemnly	affirm	and	declare	that	above
provided information is true and correct to	the b	est of 1	my/our kn	owledge	and	belief a	and th	at the
undertaking given by me/us shall be maintained by me/us so long as the registration of the said								
business under the Assam Value Added Tax Act, 2003, remains in force or till the liability under								
that Act is discharged.								
Place		Sig	nature					
		Sta	itus					•••
Date		Na	me in CAF	PITALS	••••			· • •

FOR OFFICE USE ONLY

1	Date of receipt of application:
2	Effective date of registration:
3	Date of certification by Prescribed Authority
4	Date of refusal of registration by Prescribed Authority
5	General Registration Number (GRN)