

## Form WA-03

(See Rule 25 of the Arunachal Pradesh Goods Tax Rules, 2005)

### Application for Cancellation of Approval Certificate under Arunachal Pradesh Goods Tax Act, 2005

<p>Checklist of Supporting Documents</p> <p><b>Please tick as applicable</b></p> <p><b>Mandatory Documents</b></p> <p><input type="checkbox"/> Certificate of Approval issued to the Warehouse</p>	<p><b>Supporting Documents</b></p> <p><input type="checkbox"/> Proof of discontinuance of business</p> <p><input type="checkbox"/> Proof of closure of incorporated body</p> <p><input type="checkbox"/> Proof of death of sole proprietor</p> <p><input type="checkbox"/> Proof of dissolution of firm</p> <p><input type="checkbox"/> Proof that the Warehouse has cleared all dues to the department</p> <p>Others, please specify _____</p>
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#### Reasons for Rejection (For Office Use Only)

**Please tick as applicable**

Not attached Mandatory Support Document(s) \_\_\_\_\_

Other \_\_\_\_\_

Please attach your tax return for the period ending on the effective date for cancellation of your registration. Please remember that if you are registered under the CST, you will have to file a separate application for the purpose of cancellation of CST Registration.

1. Approval Certificate Number \_\_\_\_\_
2. Full Name of Applicant Warehouse \_\_\_\_\_
3. Trade Name \_\_\_\_\_
4. Reason for Cancellation  
 Discontinuance of business  
 Closure of incorporated body  
 Death of sole proprietor  
 Dissolution of firm  
 Others, please specify \_\_\_\_\_  
*Tick one*
5. Effective date of Cancellation  
*Date of the above event* \_\_\_\_\_  
DD / MM / YYYY
6. Details of any government dues \_\_\_\_\_

Verification :

I/We \_\_\_\_\_ hereby solemnly affirm and declare that the information given hereinabove is true and correct to the best of my/our knowledge and belief and nothing has been concealed therefrom.

Signature of Authorised Signatory \_\_\_\_\_

Name \_\_\_\_\_

Designation \_\_\_\_\_

Place \_\_\_\_\_

Date \_\_\_\_\_