

FORM 101
(See rule-5)

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APPLICATION FOR CERTIFICATE OF REGISTRATION UNDER
SECTION 21 AND 22 OF THE ACT.
(See section 21 and 22 of GVAT Act, 2003)

To,
The Commercial Tax Officer,
Unit.....
.....

01 Name of business for which application is made

- 02 (a) Income Tax Permanent Account Number(PAN)of the
Business for which application for registration is made:-----
(b) Import/Export Code No.....
(c) Central Excise Registration No.....
(d) Electrical Energy Supply Service No.....
(e) Enrolment Certificate No. under Gujarat Professional Tax Act
(f) Registration Certificate No. under Gujarat Professional Tax Act.....

03 Name of the owner of the business:
Shri/Smt/Kum.-----Date of birth-----Place-----
Name of father/husband-----
Status of owner of business:-----
Residential address of the person }Room/Block/Flat No.-----
Responsible for business: }Municipal No & Name of building-----
Road/Street/Land.....area/Locality/ward.....
Post Office.....Taluka/Sub-Division.....
Village/Town/City.....District.....
Pin Code No.....Telephone No.....
Fax No.....E-mail id No.....
Web-site

04 Address of principal } Room/Block/Flat No.-----
place of business } Municipal No & Name of building-----
Road/Street/Land.....area/Locality/ward.....
Post Office.....Taluka/Sub-Division.....
Village/Town/City.....District.....
Pin Code No.....Telephone No.....Telex No....
Fax No.....E-Mail id No.....
Web-site

05 Status of business (put "√" Mark in the box applicable)

Sole Proprietorship	<input type="checkbox"/>	Partnership	<input type="checkbox"/>
Private Ltd Co	<input type="checkbox"/>	Public Ltd Co	<input type="checkbox"/>
HUF	<input type="checkbox"/>	Local Authority	<input type="checkbox"/>
Corporation	<input type="checkbox"/>	Co-op Society	<input type="checkbox"/>
Association	<input type="checkbox"/>	Others	<input type="checkbox"/>

06 Nature of business activities (Put "√" mark in box or boxes applicable)

Manufacturer	<input type="checkbox"/>	Reseller	<input type="checkbox"/>
Importer	<input type="checkbox"/>	Exporter	<input type="checkbox"/>
Wholesaler	<input type="checkbox"/>	Retailer	<input type="checkbox"/>
Commission Agent	<input type="checkbox"/>	C & F Agent	<input type="checkbox"/>
Stockiest	<input type="checkbox"/>	Distributors	<input type="checkbox"/>
Works Contractors	<input type="checkbox"/>	Hire purchaser	<input type="checkbox"/>
Leasing	<input type="checkbox"/>	Hotelier	<input type="checkbox"/>

07 Name of commodities relating to business.....

08 Details of property: _____

09 Bank Account Details:

Sr No	Bank Name	Branch Address And its code	Bank Account Number	Type of Account	Seal & Signature of The Banker

10 Address of additional place of business (Use Form 101A & 101B to give details) (including those outside Gujarat)

11 Other business in which the applicant has interest: (Use Form 101C to give details)

12 Declaration by partners: (Use Form 101D to give details)

13 (a) Total turnover of the applicant's business has first exceeded Rs.5,00,000 on
(b) Taxable turnover of the applicant's business has first exceeded Rs.10,000 on
(Not applicable to a dealer applying under section 22 of the Act.)

14 I.....have succeeded on.....in the business
of shri/Messrs.....consequent upon :
(i) death of.....
(ii) Partition of Hindu Undivided Family.....
(iii) Dissolution of Firm.....
(iv) Transfer of business in whole or part.....
(v) Change of ownership.....

And am/ is consequently liable to pay tax and to apply for registration. The said shri/
Messrs..... was/ were registered under the
..... Act under registration no..... dated

15 I attach herewith the following documents duly authenticated by a sales tax practitioner whose
name has been entered into the list as per rule 59

- (i) Document regarding proof of place of business;
- (ii) Proof of domicile;
- (iii) Passport size photograph of applicant.
- (iv) The name, designation and specimen signature of the person/s authorised to sign
cash memo, tax invoice, retail invoice, delivery chalan, credit /debit note or any forms
prescribed or appended to any notification.

16. Estimated turnover during the period commencing
from date of application for the first year.

Declaration

I of the above enterprise hereby declare that the above particular
given are true and complete. I here by submit the application form for the issuance Certificate of
Registration under section 21/22 of the Gujarat Value added Tax Act 2003.

Place:

Signature:

Date :

Name of the applicant:

Status:

ACKNOWLEDGEMENT

Received the application for registration under section 21/22 of GVAT Act,2003 from
Shri/Smt/Kum.....

Inward/Receipt No:-..... Inward/Receipt Date.....

Receiving Office:.....Signature of receiving official

FOR OFFICE USE ONLY

Inward/Receipt No:-.....

Date of Inward/Receipt:.....

Application accepted/rejected.....

Hearing date:.....Hearing place.....

Date of spot visit.....

Name and designation of the officer who made spot visit.....

The registration number allotted.....

Registering Authority's Code No.

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Processing Authority

Signature

Name

Designation

Date:-

Registering Authority

Signature

Name

Designation

Date:-