

FORM I (C)
(See sub-rule (1) of rule 12)

**APPLICATION FOR REGISTRATION OF A CASUAL DEALER UNDER THE
UTTARANCHAL VALUE ADDED TAX ACT, 2005.**

To,
The Assessing Authority, Commercial Tax
Sector_____Circle_____

1-(a) Name of applicant: -----
(b) Father's /Husband's name: -----
(c) Residential address: -----

(d)Status in business : -----

2-(a)Name of dealer -----
(b)Constitution of business (a)Proprietorship (b)Partnership (c)HUF(d)Government Co.
(Tick one as applicable) (e)Public Ltd.Co.(f)Private Ltd.Co.(g)Government Corporation
(h)Public Sector Undertaking(i)Government Department /
Society/Club/Trust (j)Others, Please specify-----

3- Principal place of business :-----
in Uttaranchal with -----
complete address: Tel.Ph.No.-----Fax-----e-mail-----

4- Name and address of -----
Registered/Head office, -----
if situated outside -----
Uttaranchal with Sales. Registration No.(State)------(C.S.T.)-----
Tax Registration Nos. Tel.Ph.No.-----Fax-----e-mail-----

5-Name and address of all other places of business including depots and branches in Uttaranchal:

Sl. No.	Address of business place	Name and complete address of owner of the premises	Telephone number	If rented premises	
				Amount of rent per month	Date from which taken on rent
1-					
2-					
3-					
4-					

6- Details of particulars of Proprietor/ Partners/ Members and Karta of Joint Hindu Family/ Trustee/ Receiver or Guardian of a minor or incapacitated person (as the case may be):

SINo	Name	Father's/Husband's name	Age	Permanent residential address	Signature
1					
2					
3					
4					

7-Period for which Registration is required: From -----To-----

8-Details of deposit of (a)Treasury challan No. -----Dated -----

Registration fees
(including late fee, if any)

Amount Rs.------(Registration fees -----Late fee-----)
Name of Bank (with Branch)/ -----
Treasury or Sub-Treasury -----

Passport size
 photograph of
 the applicant to
 be affixed

DECLARATION

I, -----(applicant) do hereby declare that the particulars furnished in this application are true and complete to the best of my knowledge and belief, and no material particular has been concealed.

Place :-----

Signature of the applicant -----

Name : -----

Dated:-----

Status in business -----

(SEAL)

WITNESS:

Signature (1) ----- (2) -----

Name: -----

Parentage: -----

Full address: -----

Signature and details of the person
 who has attested signature and
 photograph of the applicant

Signature: -----

Name: -----

Status: -----

(SEAL)

Annexure I (Form I(C))

1-Name of the dealer -----
 and address -----

2-Nature of business : -----

3- Description of goods in which business is carried on and the value of stock -in -hand at the time of commencement of business

Sl. No.	Broad category of goods		Stock of goods purchased within the State	Stock of goods purchased / received from outside the State
	Code No.	Commodity		
1-				
2-				
3-				
4-				
5-				
Total				

4- Tentative period of business : From-----To-----

- 5- Estimated turnover of sale of goods Rs.-----
- 6- Estimated liability of tax for one month
or such lesser period for which
business is intended to be conducted: Rs.-----
- 7- Description of goods intended to be
purchased or likely to be received
from outside Uttaranchal: -----

- 8- Estimated number of Declaration
Forms required for import of goods
from outside Uttaranchal: -----

Declaration

I, -----being----- (Status, i.e., Proprietor, Partner, Director etc .) of the business known as -----do hereby declare and verify that, to the best of my knowledge and belief, the information and particulars given above are true and complete and nothing has been willfully omitted or wrongly stated.

Date-----

Signature-----
Name -----
Status-----