

**GOVERNMENT OF ANDHRA PRADESH
COMMERCIAL TAXES DEPARTMENT**

FORM TOT 052

RESPONSE TO NOTIFICATION OF CHANGES IN TOT REGISTRATION DETAILS

Date Month Year

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01. Tax Office Address:

02

GRN

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03. Name : _____

Address: _____

Your notification of changes in registration details in Form TOT 051 dated _____ has been received.

I am to advise you as follows:

- *(1) Your change in address has been noted, you should submit your TOT Registration Certificate to this office for necessary action.
- *(2) Your change in name/legal status has been noted. I enclose herewith a Form TOT 014 to cancel your current registration and Form TOT 001 to apply for registration under your new name / legal status.
- *(3) I enclose herewith a Form TOT 014 to apply for cancelling your TOT Registration.
- *(4) I have received your notification of a change in composition of the partnership, director's etc., but have to advise you that cancellation of your registration is not appropriate. You must continue to file Quarterly returns and pay TOT to the Tax Department.
- *(5) Your change in business activities / principal commodities traded has been recorded.
- *(6) Your change in bank account details has been recorded.

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

* Strike off which is not applicable.