

**GOVERNMENT OF ANDHRA PRADESH
COMMERCIAL TAXES DEPARTMENT**

FORM VAT 124

NOTIFICATION OF CANCELLATION OF VAT REGISTRATION

[See Rule 14 (5)]

Date Month Year

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01. Tax Office Address:

02	TIN																		
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03. Name : _____

Address: _____

1. * It is confirmed that your VAT registration has been cancelled with effect from _____
You are reminded that should your taxable turnover exceed the registration limits in the future, you must apply for registration.
2. *You are advised by this office notice in Form VAT 125 dated _____ proposing cancellation of your VAT registration indicating reasons therewith. Since you have not responded to the notice, I am confirming the cancellation of your VAT Registration, which is effective from _____.

You have the right to appeal against this order within 30 days of date of receipt of this order.

**COMMERCIAL TAX OFFICER,
VAT REGISTERING AUTHORITY,
_____ CIRCLE.**

* Strike off which is not applicable.