

**GOVERNMENT OF JHARKHAND
COMMERCIAL TAXES DEPARTMENT**

Form JVAT 103

[See Rule 4(i) and 4(iii)]

Application for the grant of Registration as Registered Retailers for payment of Presumptive Tax / Composition Tax
U/s 22 / 58 of the Jharkhand VAT Act, 2005
(The Dealer shall not be entitled to issue Tax Invoices)

To

The Registering Authority,
..... Circle/Sub-Circle.

I/We Proprietor/Partner(s)/Karta of HUF/Principal Officer managing the business/affairs of the Company/Society/Association of Persons/Club/Head of the Department or any other officer duly authorised by him in writing, of the business, details of which are given below, hereby apply on behalf of the said business for grant of a certificate of registration under the Jharkhand Value Added Tax Act, 2005, for which a registration fee of Rs. 50.00 has been paid on..... vide Ch No..... date...../ by affixing court fee stamp worth Rs.50.00 on this application :-

1. Name and style of the :
business

TIN (Tax Identification Number)

2. Permanent Account number of the Dealer(s)/Business(PAN)

3. Constitution of the business (✓) whichever is applicable

Proprietorship	Public Limited Company	Association of Persons
Partnership	HUF	Club
Private Limited Company	Co-Operative Society	Others

4. Nature of Business (✓) whichever is applicable

Works Contractor	Distributor	Stone Crushing Unit	
Retail Trade	Stockiest	Old & Used Motor Vehicles	
Restaurant/Eating House	Brick Kiln Owner	Others	
Caterer			

5. (a) Principal Commodities in which the business deals in and

(b) The items codes therein

6. Basis of incurring liability to pay tax (✓) whichever is applicable. (a) Sale exceeding the specified quantum u/s 8(5) of the Act
(b) Voluntary registration
(c) Other Provisions

7. Date of liability

D	D	-	M	M	-	Y	Y	Y	Y
		-			-				

8. Details of Bank Account(s)

Name of Bank with address	Type of account	Account Number

9. Details of immovable properties owned wholly or partly by the business.

Serial. No.	Description of property	Address where property is Situated	Approximate value	Share Percentage

10. Script in which account books are maintained.

11. State: whether your accounts are computerized: Yes / No (please tick)
12. State: whether you were registered under the Repealed Act or CST Act Yes / No (please tick)
If Yes: Please specify your Regn. Nos. -
13. The names, addresses and other details of the Proprietor, each of the Partner, Karta of HUF and each Director (in case of Private limited Company) are attached as per Annexure – I.
14. A copy of the Partnership deed /Memorandum of Articles of Association is enclosed.
15. The details of security furnished are attached as per Annexure-II.
16. Passport size (self signed) photographs of the proprietor, each of the partner, Karta of HUF and each director (in case of private limited company) are pasted below.

Name _____
Status _____

Name _____
Status _____

Name _____
Status _____

Name _____
Status _____

Name _____
Status _____

Name _____
Status _____

VERIFICATION

I/We _____ do hereby solemnly affirm and declare that the information contained in this application, including Annexures attached herewith, is true and correct to the best of my/our knowledge and belief.

Place : _____ Signature

Date: _____ Status.....

Full Name

DECLARATION

- (vii) I/We hereby undertake to abide by the provisions of the Jharkhand Value Added Tax Act, 2005 and the Jharkhand Value Added Tax Rules, 2006.
- (viii) A signboard in the name of my/our business has already been displayed at all the business premises.
- (ix) That the books of accounts in respect of the said business are being maintained and shall be found at the said business premises.

Place..... Signature

Date Status.....

Full Name

(Signature of other partners in case of partnership business)

(1) Place.....	Signature.....	(2) Place.....	Signature.....
Date.....	Full Name	Date.....	Full Name
	Status.....		Status.....
(3) Place.....	Signature.....	(4) Place.....	Signature.....
Date.....	Full Name	Date.....	Full Name
	Status.....		Status.....

(For office use only)

Acknowledgement receipt No. Date Circle

Signature and Stamp of section clerk