

Form VAT – 55

[See Rule 64 (3)]

Enrolment Certificate for Tax Practitioner

1. Enrolment Certificate No.	_____
2. Date of Enrolment/Renewal	_____
3. Name of Practitioner	_____
4. Father's Name	_____
5. Age	_____
6. Address	Building No./ Name/ Area _____
	Area/ Road _____
	Town/City _____
	District (State) _____
	Pin Code _____
	Email Id _____
	Telephone Number(s) _____
	Fax Number(s) _____

Pursuant to the provisions in rule 65, I hereby certify that the above named practitioner has been enrolled as a Tax Practitioner and is authorized to appear before any authorized officer, assessing authority, appellate authority and the Tax Board

Date of issue	_____
Date up to which certificate is valid	_____

Signature of Commissioner

SEAL

RENEWAL

The above Certificate is renewed on and shall remain valid up to

Signature of Commissioner

SEAL

