

FORM 3

Certificate of Registration

[See Rule 6]

Certificate of Registration Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

THIS IS TO CERTIFY THAT _____

*Proprietor/ Partner/ Karta of a Hindu undivided family/ Managing Director / Director/ Secretary of a Company/ Trustee of a Trust, carrying on business in the Trade name of---
-----, having its only/
principal place of business at -----
-----in West Bengal, has
been registered as a dealer under section *24(1)(a)/ 24(1)(b) of the West Bengal Value
Added Tax Act,2003.

1. Nature of business of the dealer : [manufacturer/distributor/agency/wholesaler/retailer/ auctioneer/works contractor/transferor of right to use goods/engaged in making hire purchase /hotelier/club/ importer/ exporter/others]	
2. Class or classes of goods manufactured by the dealer (if any) in West Bengal:	
3. Class or classes of goods imported by the dealer(if any) into West Bengal:	
4.Class or classes of taxable goods the dealer purchases or intends to purchase for resale in West Bengal:	
5.Class or classes of non-taxable goods the dealer purchases or intends to purchase for resale in West Bengal:	
6. Class or classes of goods the dealer purchases or intends to purchase as raw materials for manufacture of taxable goods in West Bengal:	
7. Class or classes of goods the dealer purchases or intends to purchase as raw materials for manufacture of non-taxable goods in West Bengal:	
8. Class or classes of goods the dealer purchases or intends to purchase for execution of works contract:	

9. **Details of Bank Account: a) Name: b) Branch: c) Account Number: d) Address:	
10. The dealer has Branch Offices in West Bengal at :	
11. The dealer has Warehouses in West Bengal at :	

12. The dealer has Factories in West Bengal at :	
--	--

Date Month Year

13. Dealer's liability to pay tax begins on			
14. Certificate of registration is valid from			
15. The dealer shall furnish return *QUARTERLY / MONTHLY in the appropriate form within the next English Calendar Month / twenty-one days from the expiry of the quarter/ month respectively and shall pay tax in accordance with the rules contained in the West Bengal Value Added Tax Rules, 2005.			

Date -----

 (Signature of the appropriate Registering Authority)
 (Full name in block letters)

(Designation)

(SEAL)

* Strike out whichever is not applicable.
 ** In case of more than one account use a separate sheet.