

Form GST REG-15*[See rule 19(1)]*

Reference Number - << >>

Date – DD/MM/YYYY

To

(Name)

(Address)

Registration Number (GSTIN/UIN)

Application Reference No. (ARN)

Dated – DD/MM/YYYY

Order of Amendment

This has reference to your application number----- dated ---- regarding amendment in registration particulars. Your application has been examined and the same has been found to be in order. The amended certificate of registration is available on your dashboard for download.

Signature

Name

Designation

Jurisdiction

Date

Place

Form GST REG-16*[See rule 20]***Application for Cancellation of Registration**

1.	GSTIN				
2.	Legal name				
3.	Trade name, if any				
4.	Address of Principal Place of Business				
5.	Address for future correspondence (including email, mobile telephone, fax)	Building No./ Flat No.		Floor No.	
		Name of Premises/ Building		Road/ Street	
		City/Town/ Village		District	
		Block/Taluka			
		Latitude		Longitude	
		State		PIN Code	
		Mobile (with country code)		Telephone	
		email		Fax Number	
6.	Reasons for Cancellation	<input type="radio"/> Discontinuance /Closure			