Form GST REG-26

[See rule 24(2)]

		Application for Enrol	ment of Existing Taxpayer	r			
Taxpa	nyer Details						
1. Pro	ovisional ID						
	gal Name (As per Permanent unt Number)						
3. Leg Cente	gal Name (As per State/r)						
4. Tra	ade Name, if any						
	manent Account Number Business						
6. Co	nstitution						
7. Sta	te						
7A Se	ector, Circle, Ward, etc. as						
7B. C	enter Jurisdiction						
	ason of liability to obtain tration	Registration under ea	rlier law				
9. Exi	sting Registrations						
Sr. No.	Type of Registration Registration Number Date of Registration						
1	TIN Under Value Added T	ax					
2	Central Sales Tax Registra	tion Number					
3	Entry Tax Registration Nu	mber					
4	Entertainment Tax Registra	ation Number					
5	Hotel And Luxury Tax Reg	gistration Number					
6	Central Excise Registration	Number					
7	Service Tax Registration N	umber					
8	Corporate Identify Number Registration	:/Foreign Company					
9	Limited Liability Partnersh Number/Foreign Limited L Identification Number						
10	Import/Exporter Code Nun	nber					
11	Registration Under Duty O Medicinal And Toiletry Ac						
12	2 Others (Please specify)						
10. Details of Principal Place of Business							
Build	ing No. /Flat No.		Floor No.				
Name	of the Premises/Building		Road/Street				

Locality/Vil	lage			District					
State				PIN Code	e				
Latitude				Longitude					
Contact Info	ormation								
Office Emai	1 Address			Office-Te	elephone Nui	nber			
Mobile Nun	nber			Office Fa	x No				
10A. Nature	of Possession of Pren	mises (Own; I	Leased	l; Rented; C	Consent; Sha	red)			
10B. Nature	of Business Activitie	s being carried out							
Factory/Mar	nufacturing O	Wholesale Busine	Retail Business			rehouse/Depot			
Bonded War	rehouse	Service Provision	0	Office/Sa	le Office 🔘	Leasing Business (0
Service Rec	ipient	EOU/ STP/ EHTP	, O	SEZ	0	Input Service Distributor (ISI			or (ISD)
Works Cont	ract	Others (Specify)	0						
11. Details of	of Additional Places o	f Business		<u> </u>		1			
Building No	./Flat No.			Floor No.					
Name of the	Premises/Building			Road/Stre	Road/Street				
Locality/Vil	lage			District					
State				PIN Code					
Latitude (Op	otional)			Longitude(Optional)					
Contact Info	ormation					L			
Office Emai	1 Address	Office Telephone			ne Number				
Mobile Nun	nber		Offic	ce Fax No					
11A.Nature	of Possession of Pren	nises (Own;	Lease	ed; Rented;	Consent; Sh	ared)	I		
11B.Nature	of Business Activities	s being carried out							
Factory/Mar	nufacturing O	Wholesale Busine	Retail Bu			ehouse/I	Depot	\circ	
Bonded War	rehouse	Service Provision		Office/Sa	le Office	Leasi	ing Busi	iness	0
Service Rec	ipient O	EOU/ STP/ EHTP	OU/ STP/ EHTP SEZ Inpu			Input	put Service Distributor (ISD)		
Works Cont	ract	Others (Specify)) Ŏ						
Add More									
12. Details of	of Goods/ Services su	pplied by the Busin	ess						
Sr. No.	No. Description of Goods				HSN Code				
Sr. No.	Description of Servi	HSN Cod			ode				
13. Total Ba	nk Accounts maintair	ned by you for cond	ucting	Business					
Sr. No.	Account Number	Type of Account	IFSC		Bank Nam	e	Bran	ch Address	s
		1 CCOunt							
	İ	1	1		1		1		

	of Proprietor/all Pa of Associations/Board			ing D	irectors and	whole tin	ne Di	rector/Mer	nbei	rs of Managing
Name		<first name=""></first>		<middle name=""></middle>			<last name=""></last>			.DI .
Name of Father/Husband		<fir< td=""><td colspan="2"><first name=""> <n< td=""><td colspan="2">Middle Name></td><td colspan="2"><last name=""></last></td><td></td><td><photo></photo></td></n<></first></td></fir<>	<first name=""> <n< td=""><td colspan="2">Middle Name></td><td colspan="2"><last name=""></last></td><td></td><td><photo></photo></td></n<></first>		Middle Name>		<last name=""></last>			<photo></photo>
Date of DD/ MM/ YYYY Birth			Gender		< <u>N</u>		Male, Female, Other>			
Mobile Num	ber			Ema	il Address					
Telephone N	Vumber									
Identity Info	rmation	l .		l			l .			
Designatio n		Dire	Director Identification Number							
Permanent Account Number		Aad	Aadhaar Number							
Are you a ci	tizen of India?		<yes no=""></yes>		Passport N	umber				
Residential A	Address									
Building No	/Flat No				Floor No					
Name of the Premises/Building					Road/Street					
Locality/Village					District					
State			Pl		PIN Code					
15. Details o	of Primary Authorised	Signa	ntory		•			•		
Name		<fir< td=""><td colspan="2"><first name=""></first></td><td>ddle Name></td><td></td><td colspan="2"><last name=""></last></td><td></td><td></td></fir<>	<first name=""></first>		ddle Name>		<last name=""></last>			
Name of Father/Husband		<fir< td=""><td colspan="2">First Name> <</td><td colspan="2"><middle name=""></middle></td><td colspan="2"><last name=""></last></td><td></td><td><photo></photo></td></fir<>	First Name> <		<middle name=""></middle>		<last name=""></last>			<photo></photo>
Date of Birth		DD/	MM/YYYY	Gender		<male,< td=""><td>Fema</td><td colspan="2">nale, Other></td><td>VI HOTO</td></male,<>	Fema	nale, Other>		VI HOTO
Mobile Num	iber			Email Address						
Telephone N	lumber			ı			I			
Identity Info	rmation									
Designation				Director Identification Nur			ber			
Permanent Account Number				Aadhaar Number						
Are you a citizen of India?			<yes no=""></yes>		Passport Number		•		•	
Residential A	Residential Address									
Building No/Flat No					Floor No					
Name of the	Premises/Building			Road/Street		t				
Locality/Village				District						
State				PIN Code						
Add More	Add More									
List of Docur	nents Uploaded									
	list of documents re n to upload relevant a								l be	auto-populated

16. Aadhaar Verification

I on behalf of the holders of Aadhaar numbers provided in the form, give consent to "Goods and Services Tax Network" to obtain details from UIDAI for the purpose of authentication. "Goods and Services Tax Network" has informed me that identity information would only be used for validating identity of the Aadhaar holder and will be

1 1 1 0 1 1 5	D 1 1 0 1				
shared with Central Identities Data	Repository only for the purpose of	authentication.			
17. Declaration					
I, hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.					
Digital Signature/E-Sign					
Name of the Authorised		Place			
Signatory					
Designation of Authorised		Date			
Signatory					
Instructions for filing of Application for enrolment					
3 Every person other than a person deducting tax at source or an Input Service Distributor registered under an					

- 3. Every person, other than a person deducting tax at source or an Input Service Distributor, registered under an existing law and having a Permanent Account Number issued under the Income-tax Act, 1961 (Act 43 of 1961) shall enroll on the common portal by validating his e-mail address and mobile number.
- 4. Upon enrolment under clause (a), the said person shall be granted registration on a provisional basis and a certificate of registration in **FORM GST REG-25**, incorporating the Goods and Services Tax Identification Number therein, shall be made available to him on the common portal:
- 5. Authorisation Form:-

For each Authorised Signatory mentioned in the application form, Authorisation or copy of Resolution of the Managing Committee or Board of Directors to be filed in the following format:

Declaration for Authorised Signatory (Separate for each signatory)

I ---

(Details of Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc)

1. << Name of the Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc>>

2.

3.

Place

hereby solemnly affirm and declare that << name of the authorised signatory>> to act as an authorised signatory for the business << Goods and Services Tax Identification Number - Name of the Business>> for which application for registration is being filed/ is registered under the Central Goods and Service Tax Act, 2017.

All his actions in relation to this business will be binding on me/ us.

Signatures of the persons who are Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc.

S. No. Full Name Designation/Status Signature

1.

2.

Acceptance as an authorised signatory

I <<(Name of the authorised signatory>> hereby solemnly accord my accepta the above referred business and all my acts shall be binding on the business.	ance to act as authorised signatory for
	Signature of Authorised Signatory
	Designation/Status
Date	

Instructions for filing online form

- Enter your Provisional ID and password as provided by the State/Commercial Tax/Central Excise/Service Tax Department for log in on the GST Portal.
- Correct Email address and Mobile number of the Primary Authorised Signatory are to be provided. The Email address and Mobile Number would be filled as contact information of the Primary Authorised Signatory.
- E mail and Mobile number to be verified by separate One Time Passwords. Taxpayer shall change his user id and password after first login.
- Taxpayer shall require to fill the information required in the application form related details of Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees, Principal Place of Business and details in respect of Authorised signatories.
- Information related to additional place of business, Bank account, commodity in respect of goods and services dealt in (top five) are also required to be filled.
- Applicant need to upload scanned copy of the declaration signed by the Proprietor/all
 Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of
 Associations/Board of Trustees etc. in case he/she declares a person as Authorised Signatory as per
 Annexure specified. Documents required to be uploaded as evidence are as follows:-

1. Photographs wherever specified in the Application Form (maximum 10)

Proprietary Concern – Proprietor

Partnership Firm/Limited Liability Partnership – Managing/ Authorised

Partners (personal details of all partners is to be submitted but photos of only ten partners including that of Managing Partner is to be submitted)

Hindu Undivided Family - Karta

Company – Managing Director or the Authorised Person

Trust - Managing Trustee

Association of Person or Body of Individual –Members of Managing Committee (personal details of all members is to be submitted but photos of only ten members including that of Chairman is to be submitted)

Local Body – Chief Executive Officer or his equivalent

Statutory Body - Chief Executive Officer or his equivalent

Others - Person in Charge

2. Constitution of business: Partnership Deed in case of Partnership Firm, Registration Certificate/Proof of Constitution in case of Society, Trust, Club, Government Department, Association of Person or Body of Individual, Local Authority, Statutory Body and Others etc.

3. Proof of Principal/Additional Place of Business:

(a) For Own premises –

Any document in support of the ownership of the premises like Latest Property Tax Receipt or Municipal Khata copy or copy of Electricity Bill.

(b) For Rented or Leased premises -

A copy of the valid Rent/Lease Agreement with any document in support of the ownership of the premises of the Lessor like Latest Property Tax Receipt or Municipal Khata copy or copy of Electricity Bill.

(c) For premises not covered in (a) and (b) above -

A copy of the Consent Letter with any document in support of the ownership of the premises of the Consenter like Municipal Khata copy or Electricity Bill copy. For shared properties also, the same documents may be uploaded.

4 Bank Account Related Proof:

Scanned copy of the first page of Bank passbook/one page of Bank Statement

Opening page of the Bank Passbook held in the name of the Proprietor/Business Concern – containing the Account No., Name of the Account Holder, MICR and IFSC and Branch details.

- For each Authorised Signatory: Letter of Authorisation or copy of Resolution of the Managing Committee or Board of Directors to that effect as specified.
 - After submitting information electronic signature shall be required. Following person can electronically sign application for enrolment:-

Constitution of Business	Person who can digitally sign the application
Proprietorship	Proprietor
Partnership	Managing/Authorised Partners
Hindu Undivided Family	Karta
Private Limited Company	Managing/Whole-time Directors and Managing Director/Whole Time Director/ Chief Executive Officer
Public Limited Company	Managing/Whole-time Directors and Managing Director/Whole Time Director/ Chief Executive Officer
Society/ Club/ Trust/ AOP	Members of Managing Committee
Government Department	Person In charge
Public Sector Undertaking	Managing/Whole-time Director and Managing Director/Whole Time Director/ Chief Executive Officer
Unlimited Company	Managing/ Whole-time Director and Managing Director/Whole Time Director/ Chief Executive Officer
Limilted Liability Partnership	Designated Partners
Local Authority	Chief Executive Officer or Equivalent
Statutory Body	Chief Executive Officer or Equivalent
Foreign Company	Authorised Person in India
Foreign Limited Liability Partnership	Authorised Person in India
Others	Person In charge

• Application is required to be mandatorily digitally signed as per following:-

Sl. No	Type of Applicant	Digital Signature required			
1.	Private Limited Company	Digital Signature Certificate(DSC)			
	Public Limited Company	Class 2 and above			
	Public Sector Undertaking				
	Unlimited Company				
	Limited Liability Partnership				
	Foreign Company				
	Foreign Limited Liability Partnership				
2.	Other than above	Digital Signature Certificate class 2 and above			
		and above			
		e-Signature			

Note:- 1. Applicant shall require to register their DSC on common portal.

2. e-Signature facility will be available on the common portal for Aadhar holders.

All information related to Permanent Account Number, Aadhaar, Director Identification Number, Challan Identification Number, Limited Liability Partnership Identification Number shall be online validated by the system and Acknowledgment Reference Number will be generated after successful validation of all the filled up information.

Status of the online filed Application can be tracked on the common portal.

- 1. Authorised signatory should not be minor.
- 2. No fee is applicable for filing application for enrolment.

Acknowledgement	
Enrolment Application - Form GS	T- has been filed against Application Reference Number (ARN) <>.
Form Number	: <>
Form Description :	<application enrolment="" existing="" for="" of="" taxpayers=""></application>
Date of Filing	: <dd mm="" yyyy=""></dd>
Taxpayer Trade Name:	<trade name=""></trade>
Taxpayer Legal Name:	<legal as="" by="" center="" name="" shared="" state=""></legal>
Provisional ID Number:	<provisional id="" number=""></provisional>
It is a system	generated acknowledgement and does not require any signature
	Form GST REG-27
	[See rule – 24(3)]
Reference No.	< <date-dd mm="" yyyy="">></date-dd>
То	
Provisional ID	
Name	
Address	
Application Reference Number (A	(RN) < > Dated < DD/MM/YYYY>
Sh	ow Cause Notice for cancellation of provisional registration
This has reference to you been found to be satisfactory for the	ar application dated The application has been examined and the same has not ne following reasons:-
1	
2	
You are hereby directed cancelled.	to show cause as to why the provisional registration granted to you shall not be
	Signature
	Name of the Proper Officer
	Designation
	Jurisdiction

Date

Place

Form GST REG-28 [See rule 24(3)]

Reference No. - << Date-DD/MM/YYYY>>

To Name Address

GSTIN/Provisional ID