

**THE KERALA VALUE ADDED TAX RULES, 2005**

**FORM NO.1**

**APPLICATION FOR REGISTRATION**

*[See Rule 17 (7)]*

To  
The Registering Authority  
(with Office Address)  
.....  
.....  
.....

**PHOTO**  
( Photo should be attested by the Registering Authority/ Assessing Authority/ Gazetted Officer).

1. I/We.....  
son/daughter of .....  
residing at (specify address) .....  
.....  
.....

/ on behalf of the dealer / carrying on business whose particulars are given in the schedule attached hereto, hereby apply for a registration under the Kerala Value Added Tax Act, 2003.

2. I/We agree to abide by the terms and conditions of the Registration, which may be imposed from time to time. I/We also agree to abide by all the provisions of the KVAT Act, the KVAT Rules made there under and any orders issued there under.

3. The fee prescribed has been paid and the chalan/demand draft is enclosed.

4. I/We..... declare that to the best of my/our knowledge and belief the information furnished herein is true and complete.

Place : .....

Date : .....

Name, Signature with status of the applicant

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**ACKNOWLEDGEMENT**

Received an application for registration in **Form No.1 with schedule** from (Name with full Address) .....  
.....

Place:.....

Date: .....



Signature and Designation of receiving officer.

## **INSTRUCTIONS FOR FILLING UP THE APPLICATION**

1. All particulars in this Application Form should be filled in English Block letters
2. Wherever the space is inadequate to fill the required details, furnish such details/data in a separate sheet in the same format given for the respective item/items.
3. Wherever the particulars are not applicable or not relevant to the dealer, mention **NOT APPLICABLE** against such item/items
4. Corrections and overwriting are not allowed in filling the Application Form
5. The applicant may seek the assistance/guidance of the respective Assessing / Registering Authorities of the Commercial Taxes Department in case of any doubt or difficulty in filling the Application.
6. The Application should be verified properly and duly signed and dated. The signatory of the Application should satisfy that all the particulars furnished in the application and accompanying enclosures are correct and complete in all respects.
7. The details of the all the commodities dealt by the dealer shall be furnished in item No. 7 of the Application Form in the given format.
8. The applicant is requested to retain the Xerox copy of the filled Application Form as his office copy.
9. The duly filled Application Form shall be sent to the concerned Assessing / Registering Authority along with the registration fees and the enclosures on or before **20-4-2007**.

COMMISSIONER OF COMMERCIAL TAXES

[Please refer instructions before filling the application]

**SCHEDULE**

1. Name and full postal address of the dealer <i>[Specify Trade Name, Ward No., Building No., Street Name, Postal PIN, Telephone No. with STD code, Mobile No., Income Tax PAN ]</i>	
2. Date of commencement of business within the State <i>(Not applicable to dealer already registered under the KGST Act, 1963)</i>	

3. Status of Business (  Tick appropriate Box/Boxes)

Proprietary concern	Partnership concern	Private Ltd. company	Public Ltd. company	Co-operative Society	Trust	State public sector under taking	Central public sector undertaking	Others (Specify)

4. Details of Proprietor/all Partners/all Directors/all Trustees

Sl. No.	Name & Permanent Residential Address with Pin and Phone No.	Age & Date of birth	Present Residential Address with Pin and Phone No.	IT PAN No.	Signature
1	2	3	4	5	6
1					
2					
3					
4					
5					
Name, address and signature of Witness attesting the signature in Column No. 6					

5. If Agent of a Non Resident Dealer/ Franchisee/ Local Branch of a Business concern situated outside the State, mention full address of the Non Resident Dealer with postal Pin code, Name of the State and the Registration No. allotted by the Commercial Taxes Department of such Non Resident Dealer	
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6. Nature of business activity (Write 'Yes' / 'No' in the appropriate Box)

No.	Nature of Business	'Yes'/'No'
1.	Purchases—Local/Interstate/Import <i>(Strike out whichever is not applicable)</i>	
2.	Stock transfer receipts as principle/agent—Local/ Interstate/ Import <i>(Strike out whichever is not applicable)</i>	
3.	Sales—Local/Interstate/Export <i>(Strike out whichever is not applicable)</i>	
4.	Stock transfers to HO/Br./Agent/Principal—Local/Interstate/ Export <i>(Strike out whichever is not applicable)</i>	
5.	Manufacturer	
6.	Works contract	
7.	Lease	
8.	Hire purchase	
9.	Transfer of right to use	
10.	Others <i>(Specify)</i>	



10. Mention Registration Certificate Number/ PIN held before the submission of this application (if any)	
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11. Total Turnover of the year preceding to which this application is submitted <i>(Not applicable to dealer already registered under the KGST Act 1963 / VAT Act 2003)</i>	Purchase	Sales

12. Total Turnover estimated for the financial year relating to the Application <i>(Not applicable to dealer already registered under the KGST Act 1963 / VAT Act 2003)</i>	Purchase	Sales

13. If registration under the CST Act is required, mention 'Yes'/'No' in the appropriate Box			
Under Section 7 (1)		Under Section 7 (2)	

14. Details of the Bank accounts of the business concern			
Sl. No.	Name and Place of the Bank	Bank Account No. with BSR code	Nature of Account (Current A/c, CC A/c etc)

15. Details of Assets, Bank Accounts of the Proprietor/all Partners/all Directors/all trustees			
Sl. No.	Name of the Proprietor/Partners/ Directors/ Trustees	Details of immovable properties (Area, Survey No, Taluk, Village etc)	Details of bank accounts / Shares/ securities

16. Details of other concerns or sister concerns within the State in which the proprietor, any of the partners or any of the directors or any of the trustees has an interest			
Sl. No.	Name	Name and address of the concern	Details of IT PAN/ Registration Certificate No.

17. If Statutory Licenses or Permit are required from any Local Bodies, other Government Department or Agency or Board, details of such Licenses obtained	
Name of the Local Body/ Department/ Agency	Details of Licenses or permits

18. Details of Registration application fee paid for the principal place of business and /or additional places of business.		
Amount (Rs.)	Name of the Bank with Chalan/Demand Draft No.	Date

19. Name and address of the manager of the business, if a manager is appointed	
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20. Name and address of the Power of Attorney Holder, if any, appointed in relation to the business/tax matters	
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21. List of enclosures

Sl.No.	Name of the Enclosure	Yes/No	Sl.No.	Name of the Enclosure	Yes/No
1	Registration fee (by DD)		3	Two passport size photographs	
2 (i)	<b>If partnership Firm/Company, (If not filed previously)</b>		4	Self-attested copy of PAN card	
	(a) Attested copy of Partnership Deed/ Memorandum & Articles		5	Self attested copy of Lease Deed	
	(b) Certified copy of resolution to apply for registration and authorization, and		6	Self-attested copy of Licence from Corporation/Municipality/Grama Panchayat	
	(c) Declaration in Form No.2/2A				
(ii)	If proprietary concern, An attested copy of a registered power of attorney if the application is signed by an individual other than the proprietor.		7	Security Deposit in the form of bank guarantee / Demand Draft / National Savings Certificate/ Fixed Deposit.	

Place:

Date:

Name, address and signature of the person signing with status and relationship to the dealer (Here state whether proprietor, partner, director, trustee, Power of Attorney holder etc.)

**FOR OFFICE USE**

1. Date of receipt of Application :
2. Whether Registration Certificate granted (Mention Yes/No) :
3. If Yes, date of issue with TIN No. :
4. (a) If No, reason for the rejection :  
(b) Date of communication of orders of rejection :  
(c) Result of appeal or revision against orders of rejection :
5. Nature of Security furnished under Rule 19 of KVAT Rules, 2005 :
6. Details of immovable properties held by sureties in the case of personal bond :

Name and address	Extent of holding of surety	Survey No., Village and Taluk	Whether solvency filed (mention Yes/No)

7. Commodity group code to which the dealer is being classified :

Place:

Date:

Registering Authority (Name and Signature)