

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

**Form No.1**

**Value Added Tax Registration Application Form**

Acknowledgement Number (for office use only)										D	D	M	M	Y	Y	1	2	3	4	5	6	
1. Full Name of Applicant Dealer <small>(For individuals, provide in order of first name, middle name, surname)</small>																						
2. Date of Birth		D	D	/	M	M	/	Y	Y			/		/								
3. Trade Name																						
4. Principal place of business	Building Name / No.																					
	Area / Road																					
	Locality / Market																					
	Post Office																					
	PIN code																					
	Email ID																					
	Telephone Number																					
Mobile Number																						
5. Details of Branches (if any)	Building Name / No.																					
	Area / Road																					
	Locality / Market																					
	Post Office																					
	PIN code																					
	Email ID																					
	Telephone Number																					
6. Details of Godowns (if any)	Building Name / No.																					
	Area / Road																					
	Locality / Market																					
	Post Office																					
	PIN code																					
	Telephone Number																					
7. Permanent Address for communication (Residential)	Building Name / No.																					
	Area / Road																					
	Locality / Market																					
	Post Office																					
	PIN code																					
	Telephone Number																					
8. Constitution of business	<input type="checkbox"/>	Sole Proprietorship				<input type="checkbox"/>	Partnership				<input type="checkbox"/>	Registered Company										
[Tick R one as applicable]	<input type="checkbox"/>	Society				<input type="checkbox"/>	Others, please specify															
9. Nature of business	a. Trader				b. Manufacturer				c. Service													
	d. Works Contract				e. Job Work				f. Leasing													
10. Permanent Account Number of the applicant dealer (PAN)																						
11a) Licence / permit number issued by Local Bodies																						
11b) Name of the Authority																						
12a) Licence OR Registration No. issued from any other Depts.																						
12b) Name of the Authority																						

13. Commodities dealt with	
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14. Annual turnover including zero-rated sales	Rs.														
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15. Expected turnover during the year	Rs.														
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16. Date of Commencement of business		D		D		/		M		M		/		Y		Y
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17. Whether application for registration under CST Act required	YES		NO	
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18. Details of Bank Account <small>(All refunds from the Department will be credited to this account)</small>	Name of Bank														
	Name of the Branch														
	MICR Number														
	Account Number														
	Nature of Account														

19. Details of security furnished	
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20. Name and address of the Manager if appointed	Name														
	Building Name / No.														
	Area / Road														
	Locality / Market														
	Post Office														
	PIN code														
	Email ID														
	Telephone Number														
Mobile Number															

21. Name and address of Power of Attorney holder	Building Name / No.														
	Area / Road														
	Locality / Market														
	Post Office														
	PIN code														
	Email ID														
	Telephone Number														
Mobile Number															

22. Signature of applicant	23. Attested Passport sized photograph of the applicant <div style="border: 1px solid black; width: 100px; height: 80px; margin: 20px auto;"></div>
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24. List of Enclosures	
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25. Remarks of Registering Authority	<b>TIN assigned</b>															
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:5%;"></td><td style="width:5%;"></td><td style="width:5%;"></td><td style="width:5%;"></td><td style="width:5%;"></td><td style="width:5%;"></td><td style="width:5%;"></td><td style="width:5%;"></td><td style="width:5%;"></td><td style="width:5%;"></td><td style="width:5%;"></td><td style="width:5%;"></td><td style="width:5%;"></td><td style="width:5%;"></td><td style="width:5%;"></td><td style="width:5%;"></td> </tr> </table>															

See Section 15 & 16 of the Kerala Value Added Tax Act, Rule 17 of the Kerala Value Added Tax Rules

**INSTRUCTIONS**

1. All columns should be filled in capital letters.
2. If the applicant is a firm, company, association of person or society, each members have to file the residential address and Bank details and PAN separately.