

**FORM 101**  
(See rule 5)

**APPLICATION FOR CERTIFICATE OF REGISTRATION UNDER SECTIONS  
21 AND 22 OF THE ACT.**

(See section 21 and 22 of GVAT Act, 2003)

To,  
The Commercial Tax Officer,  
Unit.....  
.....

01 Name of business for which application is made  
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02 (a) Income Tax Permanent Account Number (PAN) of the  
Business for which application for registration is made:-----

(b) Import/Export Code No.....

(c) Central Excise Registration  
No.....

(d) Electrical Energy Supply Service  
No.....

(e) Enrolment Certificate No. under Gujarat Professional Tax Act  
.....

(f) Registration Certificate No. under Gujarat Professional Tax  
Act.....

(g) Registration number under Central Sales Tax Act, 1956, if any  
.....

03 Name of the owner of the business:  
Shri/Smt/Kum.-----Date of birth-----Place----

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Name of father/husband-----

Status of owner of business:-----

Residential address of the person } Room/Block/Flat No.-----

Responsible for business: } Municipal No & Name of building-----

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Road/Street/Land..... area/Locality/ward.....

Post Office..... Taluka/Sub-Division.....

Village/Town/City..... District.....

Pin Code No..... Telephone No.....

Fax No..... E-mail id

No.....

Web-site.....

04 Address of chief  
place of business }

Room/Block/Flat No. -----  
Municipal No & Name of building-----  
Road/Street/Land.....area/Locality/ward.....  
Post Office.....Taluka/Sub-Division.....  
Village/Town/City.....District.....  
Pin Code No.....Telephone No.....Telex

No....

Fax No.....E-Mail id No.....  
Web-site.....

05 Status of business  
(put “√” Mark in the  
box applicable)

Sole Proprietorship	<input type="checkbox"/>	Partnership	<input type="checkbox"/>
Private Ltd Co	<input type="checkbox"/>	Public Ltd Co	<input type="checkbox"/>
HUF	<input type="checkbox"/>	Local Authority	<input type="checkbox"/>
Corporation	<input type="checkbox"/>	Co-op Society	<input type="checkbox"/>
Association	<input type="checkbox"/>	Others	<input type="checkbox"/>

06 Nature of business  
activities  
(Put “√” mark in box  
or boxes applicable)

Manufacturer	<input type="checkbox"/>	Reseller	<input type="checkbox"/>
Importer	<input type="checkbox"/>	Exporter	<input type="checkbox"/>
Wholesaler	<input type="checkbox"/>	Retailer	<input type="checkbox"/>
Commission Agent	<input type="checkbox"/>	C & F Agent	<input type="checkbox"/>
Stockiest	<input type="checkbox"/>	Distributors	<input type="checkbox"/>
Works Contractors	<input type="checkbox"/>	Hire purchaser	<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>

Leasing

Hotelier

07 Name of commodities relating to business.....

08 Details of business property:

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09 Bank Account Details:

Sr. No	Bank Name	Branch Address And its code	Bank Account Number	Type of Account	Seal & Signature of The Banker

10 Address of additional place of business (Use Form 101A and 101B to give details) (including those outside Gujarat)

11 Details of persons authorized under section 66A: (Use Form 101C to give details)

12 Declaration by partners/directors/ persons responsible: (Use Form 101D to give details)

13 (a) Total turnover of the applicant's business has first exceeded Rs.5,00,000 on  
(b) Taxable turnover of the applicant's business has first exceeded Rs.10, 000 on  
(Not applicable to a dealer applying under section 22 of the Act.)

14 I.....have succeeded on.....in the business

of Shri/Messrs.....consequent upon :

- (i) death of.....
- (ii) Partition of Hindu Undivided Family.....
- (iii) Dissolution of Firm.....
- (iv) Transfer of business in whole or part.....
- (v) Change of ownership.....

And am/ is consequently liable to pay tax and to apply for registration. The said shri/ Messrs..... was/ were registered under the ..... Act under registration no..... dated .....

15 I attach herewith the following documents duly authenticated by a sales tax practitioner whose name has been entered into the list as per rule 59

- (i) Document regarding proof of place of business;

- (ii) Proof of domicile;
- (iii) Passport size photograph of applicant.
- (iv) The name, designation and specimen signature of the person/s authorised to sign cash memo, tax invoice, retail invoice, delivery chalan, credit /debit note or any forms prescribed or appended to any notification.

16. Estimated turnover during the period commencing from date of application for the first year.

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**Declaration**

I ..... of the above enterprise hereby declare that the above particular given are true and complete. I hereby submit the application form for the issuance Certificate of Registration under sections 21 and 22 of the Gujarat Value added Tax Act, 2003.

Place:   
 Date :

Signature:   
 Name of the applicant:   
 Status:

**ACKNOWLEDGEMENT**

Received the application for registration under sections 21 and 22 of GVAT Act,2003 from Shri/Smt/Kum.....

Inward/Receipt No:-..... Inward/Receipt Date.....  
 Receiving Office: Signature of receiving official

**FOR OFFICE USE ONLY**

Inward/Receipt No:-.....  
 Date of Inward/Receipt:  
 Application accepted/rejected.....  
 Hearing date  
 Hearing place.....  
 Date of spot visit.....  
 Name and designation of the officer who made spot visit.....

The registration number allotted.....

Registering Authority's Code No.

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Processing Authority  
Signature  
Name  
Designation  
Date:-

Registering Authority  
Signature  
Name  
Designation  
Date:-