

APPLICATION FOR CANCELLATION OF CERTIFICATE OF REGISTRATION

(See sub-rule (1) of rule 30)

01. Name and address of the business and
the date of its closure.
02. The reason for closure of business.
- i)discontinuance of business;
 - ii)being an incorporated body ceases to exist;
 - iii)being a firm or association of persons dissolved; or
 - iv)ceases to be liable to pay tax under the Act.
03. If closure is on account of sale of business,
Whether the sale has been made to any registered dealer
and if so, name and address of such registered dealer
with TIN/SRIN.
04. The full address with telephone number by which the dealer can be
contacted, if required.
05. The full address of the place and the name of the person
in charge of books of account of the business, who
can be contacted for examination of such accounts,
if required.

VERIFICATION

I _____ son/daughter/wife of
_____ (status) _____ of the business M/s.
_____ bearing TIN/SRIN _____ do
hereby solemnly affirm that the particulars furnished above are true to the best of my
knowledge and belief.”