FORM GST ENR-01

[See rule 58(1)]

Application for Enrolment under section 35(2)

[only for un-registered persons]

1.	Name of the State								
2.	(a) Legal name								
	(b) Trade Name, if any								
	(c) PA	N							
	(d) Aad	lhaar (applicable	in case of						
	proprie	torship concerns	only)						
3.	. Type of enrolment								
(i) Warehouse or Depot				(ii) Godown					
(iii) Transport services				(iv) Co	(iv) Cold Storage				
4.	Constitution of Business (Please Select the Appropriate)								
(i) P1	roprietor	ship or HUF		(ii) Partnership					
(iii) Company				(iv) Otl	(iv) Others				
5.	Particulars of Principal Place of Business								
(a)	Address								
Building No. or Flat No.				Floor No.					
Name of the				Road or Street					
Premises or Building City or Town or Locality or				Taluka or Block					
Villa	ige			1 41 6114	01 21				
District									
State				PIN Code					
Latitude				Longitu	Longitude				
(b)	Contact Information (the email address and mobile number will be used for authentication)								
Email Address				Teleph	one	STD			
Mobile Number				Fax		STD			
(c)	Nature of premises								
C)wn	Leased	Rented	Cons	ent	Shared	Others (speci	fy)	
6.	Details of additional place of business – Add for additional place(s) of business, if						siness, if any(Fill u	ıp	
	the same information as in item 5 [(a), (b), and (c)]								

7.	Consent
form purpe inform	behalf of the holder of Aadhaar number < pre-filled based on Aadhaar number provided in the behalf of the holder of Aadhaar number Services Tax Network" to obtain my details from UIDAI for the ose of authentication. "Goods and Services Tax Network" has informed me that identity mation would only be used for validating identity of the Aadhaar holder and will be shared with ral Identities Data Repository only for the purpose of authentication.
8. Lis	et of documents uploaded
(Iden	tity and address proof)
I here	rification by solemnly affirm and declare that the information given herein above is true and correct to the f my knowledge and belief and nothing has been concealed therefrom.
Place	Signature
Date:	Name of Authorised Signatory
For C	Office Use:
Enrol	ment no Date-