

[FORM GST PCT-07¹⁷⁵
[See rule 83B]

**ORDER OF CANCELLATION OF ENROLMENT AS GOODS AND
SERVICES TAX PRACTITIONER**

1. GSTP Enrolment No.	
2. Name of the GST Practitioner	< Auto Populated >
3. Address	<Auto Populated >
4. No. and Date of application	
5. Date of effect of cancellation of enrolment	

DECLARATION

This is to inform you that your enrolment as GST Practitioner is hereby cancelled with effect from

(SIGNATURE)

Place:
Date:]

¹⁷⁵Inserted vide Notification no. 33/2019-CT dt. 18.07.2019 with effect from a date to be notified later