

Government of India

FORM GST REG-06

*[See rule 10(1)]*

Registration Certificate

Registration Number**:***<GSTIN/UIN >*

|  |  |  |
| --- | --- | --- |
| 1. | Legal Name |  |
| 2. | Trade Name, if any |  |
| 3. | Constitution of Business |  |
| 4. | Address of Principal Place of Business |  |
| 5. | Date of Liability | DD/MM/ YYYY |
| 6. | Period of Validity**(***Applicable only in case of Non-Resident taxable person or Casual taxable person)* | From | DD/MM/YYYY | To | DD/MM/YYYY |
| 7. | Type of Registration |  |
| 8. | Particulars of Approving Authority |
| Centre | State |
| *Signature* |
| Name |  |
| Designation |  |
| Office |  |
| 9. Date of issue of Certificate |  |
| Note: The registration certificate is required to be prominently displayed at all places of business in the State. |

|  |
| --- |
| **Annexure A**http://www.trafficchallan.co.in/wp-content/uploads/2015/08/National-Symbols-of-India-Emblem.jpgGoods and Services Tax Identification Number**Details of Additional Places of Business** |
| Legal Name |
| Trade Name, if any |
| Total Number of Additional Places of Business in the State |
| Sr.No. | Address |
| 1 |  |
| 2 |  |
| 3 |  |
| … |  |

|  |  |
| --- | --- |
|  | **Annexure B** |
| Goods and Services Tax Identification Number |
| Legal Name |  |
| Trade Name, if any |  |
| Details of <Proprietor / Partners / Karta / Managing Director and whole-time Directors / Members of the Managing Committee of Association of Persons / Board of Trustees etc.> |
| 1. | Name |
| *Photo* | Designation/Status |
|  | Resident of State |
|  |  |
| 2. | Name |
| *Photo* | Designation/Status |
|  | Resident of State |
|  |  |
| 3. | Name |
| *Photo* | Designation/Status |
|  | Resident of State |
|  |  |
| 4. | Name |
| *Photo* | Designation/Status |
|  | Resident of State |
|  |  |
| 5. | Name |
| *Photo* | Designation/Status |
|  | Resident of State |
| 6. | Name |
| *Photo* | Designation/Status |
|  | Resident of State |
| 7. | Name |
| *Photo* |  |
|  | Designation/Status |



|  |  |  |
| --- | --- | --- |
|  |  | Resident of State |
| 8. | *Photo* | Name |
|  | Designation/Status |
|  | Resident of State |
| 9. | *Photo* | Name |
|  | Designation/Status |
|  | Resident of State |
| 10. | *Photo* | Name |
|  | Designation/Status |
|  | Resident of State |