FORM GST REG-07

*[See rule 12(1)]*

# Application for Registration as Tax Deductor at source (u/s 51) or Tax Collector at source (u/s 52)

State /UT– District –

# Part –A

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| (i) | Legal Name of the Tax Deductor or Tax Collector( As mentioned in Permanent Account Number/ Tax Deduction and Collection Account Number) | | | | | | | | |  | | |  |
| (ii) | Permanent Account Number  (Enter Permanent Account Number of the Business; Permanent Account Number of Individual in case of Proprietorship concern) | | | | | | | | |  | | |
| (iii) | Tax Deduction and Collection Account Number  (Enter Tax Deduction and Collection Account Number, if Permanent Account Number is not available) | | | | | | | | |  | | |
| (iv) | Email Address | | | | | | | | |  | | |
| (v) | Mobile Number | | | | | | | | |  | | |
| ***Note* -** *Information submitted above is subject to online verification before proceeding to fill up Part-B.* | | | | | | | | | | | | |
| ***Part –B*** | | | | | | | | | | | | |
| 1 | Trade Name, if any | | |  | | | | | | | | |
| 2 | Constitution of Business (Please Select the Appropriate) | | | | | | | | | | | |
| (i) Proprietorship | | |  | | (ii) Partnership | | | | | | |  |
| (iii) Hindu Undivided Family | | |  | | (iv) Private Limited Company | | | | | | |  |
| (v) Public Limited Company | | |  | | (vi) Society/Club/Trust/Association of Persons | | | | | | |  |
| (vii) Government Department | | |  | | (viii) Public Sector Undertaking | | | | | | |  |
| (ix) Unlimited Company | | |  | | (x) Limited Liability Partnership | | | | | | |  |
| (xi) Local Authority | | |  | | (xii) Statutory Body | | | | | | |  |
| (xiii) Foreign Limited Liability Partnership | | |  | | (xiv) Foreign Company Registered (in India) | | | | | | |  |
| (xv) Others (Please specify) | | |  | |  | | | | | | |  |
| 3 | Name of the State | | ⏏ | | | | | District | | | ⏏ | |
| 4 | Jurisdiction - | | State | | | | | | Centre | | | |
|  |  | | Sector /Circle/ Ward /Charge/Unit etc. | | | | | |  | | | |
| 5 | Type of registration | | | | | | Tax Deductor Tax Collector | | | | | |
| 6. | Government (Centre / State/Union Territory) | | | | | | Center State/UT | | | | | |
| 7. | | Date of liability to deduct/collect tax | | | | DD/MM/YYYY | | | | | | | |

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| 8. | (a) Address of principal place of business | | | | | | | | | |
| Building No./Flat No. | | | |  | Floor No. | | | | |  |
| Name of the Premises/Building | | | |  | Road/Street | | | | |  |
| City/Town/Locality/Village | | | |  | District | | | | |  |
| Block/Taluka | | | |  |
| Latitude | | | |  | Longitude | | | | |  |
| State | | | |  | PIN Code | | | | |  |
| (b) Contact Information | | | |  | | | | | | |
| Office Email Address | | | | Office Telephone number | | | | | | |
| Mobile Number | | | | Office Fax Number | | | | | | |
| **(c)** | Nature of possession of premises | | | | | | | | | |
| Own | | Leased | | Rented | | Consent | Shared | | Others(specify) | |
| 9. | Have you obtained any other registrations under Goods and Serivces Tax in the same State? | | | Yes No | | | | | | |
| 10 | If Yes, mention Goods and Services Tax Identification Number | | |  | | | | | | |
| 11 | IEC (Importer Exporter Code), if applicable | | |  | | | | | | |
| 12 | Details of DDO (Drawing and Disbursing Officer) / Person responsible for deducting tax/collecting tax | | | | | | | | | |
| Particulars | | |  |  | | | | | | |
| Name | | | First Name | | | Middle Name | | | Last Name | |
| Father‘s Name | | |  | | | | | | | |
| Photo | | |  | | | | | | | |
| Date of Birth | | | DD/MM/YYYY | | | Gender | | | <Male, Female, Other> | |
| Mobile Number | | |  | Email address | |  | | | | |
| Telephone No. with STD | | |  |  | | | | | | |
| Designation /Status | | |  | Director Identification Number (if any) | | | |  | | |
| Permanent Account Number | | |  | Aadhaar Number | | | |  | | |
| Are you a citizen of India? | | | Yes / No | Passport No. (in case of Foreigners) | | | |  | | |
| Residential Address | | | | | | | | | | |

Building No/Flat No

Name of the Premises/Building State

[12A. Details of Bank Accounts (s) [Optional]

Floor No Locality/Village PIN Code

Total number of Bank Accounts maintained by the applicant (Upto 10 Bank Accounts to be reported)

Details of Bank Account 1

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| Account Number |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Type of Account |  | | | | | | IFSC | | | | | | | | |
| Bank Name |  | | | | | | | | | | | | | | |
| Branch Address | To be auto-populated (Edit mode) | | | | | | | | | | | | | | |

Note-Add more bank accounts]10

1. Details of Authorised Signatory Checkbox for Primary Authorised Signatory

Details of Signatory No. 1

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| Particulars | First Name | Middle Name | | Last Name | |
| Name |  |  | |  | |
| Photo |  | | | | |
| Name of Father |  |  | |  | |
| Date of Birth | DD/MM/YYYY | Gender | | <Male, Female, Other> | |
| Mobile Number |  | Email address | |  | |
| Telephone No. with STD |  | | | | |
| Designation /Status |  | | Director Identification Number (if any) | |  |
| Permanent Account Number |  | | Aadhaar Number | |  |
| Are you a citizen of India? | Yes / No | | Passport No. (in case of foreigners) | |  |

Residential Address (Within the Country)

Building No/Flat No Floor No

10Inserted vide Notf no. 31/2019 – CT dt. 28.06.2019

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|  | Name of the Premises/Building | |  | Road/Street |  | | | | | |  |
| City/Town/Locality/Village | |  | District |  | | | | | |
| State | |  | PIN Code |  |  |  |  |  |  |
| Block/Taluka | |  |  |  | | | | | |
| Note – Add more … | | | | | | | | | | | |
| 14. | | Consent  *I on behalf of the holder of Aadhar number <pre-filled based on Aadhar number provided in the form> give consent to “Goods and Services Tax Network” to obtain my details from UIDAI for the purpose of authentication. “Goods and Services Tax Network” has informed me that identity information would only be used for validating identity of the Aadhar holder and will be shared with Central Identities Data Repository only for the purpose of authentication.* | | | | | | | | | |
| 15. | | **Verification**  *I hereby solemnly affirm and declare that the information given herein above is true and correct to the best of my knowledge and belief and nothing has been concealed therefrom*  (Signature)  Place:Name of DDO/ Person responsible for deducting tax/collecting tax/Authorised Signatory  Date: Designation | | | | | | | | | |

# List of documents to be uploaded (not applicable to a department or establishment of the Central Government or State Government or Local Authority or Governmental agencies):-

Proof of Principal Place of Business:

1. For Own premises –

Any document in support of the ownership of the premises like latest Property Tax Receipt or Municipal Khata copy or copy of Electricity Bill.

1. For Rented or Leased premises –

A copy of the valid Rent / Lease Agreement with any document in support of the ownership of the premises of the Lessor like Latest Property Tax Receipt or Municipal Khata copy or copy of Electricity Bill.

1. For premises not covered in (a) and (b) above –

A copy of the Consent Letter with any document in support of the ownership of the premises of the Consenter like Municipal Khata copy or Electricity Bill copy. For shared properties also, the same documents may be uploaded.

1. For rented/leased premises where the Rent/lease agreement is not available, an affidavit to that effect along with any document in support of the possession of the premises like copy of Electricity Bill.
2. If the principal place of business is located in an Special Economic Zone or the applicant is an Special Economic Zone developer, necessary documents/certificates issued by Government of India are required to

be uploaded.

**Instructions for submission ofapplication for registration as Tax Deductor/Tax Collector.**

* 1. Enter name of Tax Deductor/Tax Collector as recorded on Tax Deduction and Collection Account Number/ Permanent Account Number of the Business. Tax Deduction and Collection Account Number/Permanent Account Number shall be verified with Income Tax database.
  2. Provide Email Id and Mobile Number of DDO (Drawing and Disbursing Officer) / Person responsible for deducting tax/collecting tax for verification and future communication which will be verified through One Time Passwords to be sent separately, before filling up of the application.
  3. Person who is acting as DDO/ Person deducting/collecting tax can sign the application.
  4. The application filed by undermentioned persons shall be signed digitally.

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| --- | --- | --- |
| Sr. No | Type of Applicant | Digital Signature required |
| 1. | Private Limited Company Public Limited Company Public Sector Undertaking Unlimited Company  Limited Liability Partnership Foreign Company  Foreign Limited Liability Partnership | Digital Signature Certificate(DSC) class 2 and above |
| 2. | Other than above | Digital Signature Certificate class 2 and above, e-Signature or any other mode as specified or as may be notified. |

* 1. All information relating to Permanent Account Number, Aadhaar, Director Identification Number, Challan Identification Number shall be validated online by the system and Acknowledgment Receipt Number will be generated after successful validation of all the filled information.
  2. Status of the application filed online can be tracked on the Common portal.
  3. No fee is payable for filing application for registration.
  4. Authorised shall not be a minor.