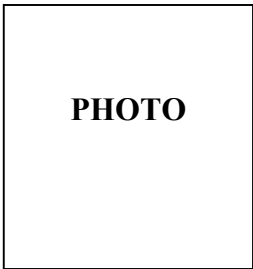


FORM A
[See rule 4(9)]
APPLICATION FOR REGISTRATION AS DEALER



To
The Registering Authority _____ Circle _____

1. NAME OF THE BUSINESS *

2. Address : *

	Building Name	Door No.	Street / Road	Village / Town / City *	PIN *
a. Principal place of business *					
b. Branch					
c. Factory					
d. Godown					

3. Address of the Head Office outside the State

4 Constitution *
(√ tick)

Proprietor	<input type="checkbox"/>
Partnership	<input type="checkbox"/>
Private Limited Company	<input type="checkbox"/>
Public Limited Company	<input type="checkbox"/>
HUF	<input type="checkbox"/>
Co-operative Society	<input type="checkbox"/>
Government Undertaking	<input type="checkbox"/>
Others	<input type="checkbox"/>

5. Business Transaction

Customs Registration BIN	
Industry Regn. No. / SSI No.	
Central Excise Regn. No.	
Registrar of Company's CIN	
Property Tax Assessment no., if any	
Income Tax PAN	
Director General of Foreign Trade's Import / Export Code	
Bank and Account no.	

6. Date of commencement of business : * / /

7. Details of the Proprietor / Partners / Directors, etc.:*

	Name	Age	Name of Father / Husband	Status	Present Address	Permanent address	Extent of share or interest in business
1							
2							
3							
4							
5							
6							
7							

Bank where account is available with Bank Code	Bank Account No.	PAN	Passport No.	Ration Card No.	Voter ID No.	Signature

8. Telephone No.

9. Fax No.

10. E-Mail ID

11. Web site:

12. Nature of Business

(√ tick)

Manufacture	<input type="checkbox"/>
Wholesale	<input type="checkbox"/>
Retail	<input type="checkbox"/>
Export	<input type="checkbox"/>
Hire Purchase	<input type="checkbox"/>

Works Contract	<input type="checkbox"/>
Leasing	<input type="checkbox"/>
Hotels	<input type="checkbox"/>
Food & Drink	<input type="checkbox"/>
Others	<input type="checkbox"/>

13. Turnover on the date of this application

Rs.

14. Main commodities dealt / to be dealt *

1.
2.

15. Sources of purchase : * (√ tick)

Within the State	Inter-State	Import from outside the country
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16. Details of immovable property, if any, for:

	Location	Survey No.	Extent of land / area	Registration Doc. No. & Year	Registration jurisdiction
(i) Business					
(ii) Proprietor / Partner / Director					

17. **Reference of Chamber of Commerce (Trade Association (or) two respectable persons /business in the applicant's area

	Name of the Chamber / business	Address	Name of the person recommending	Status	TIN	Signature with seal
1						
2						

** The details required in column 17 need not be furnished by the dealers whose registration is in force under the TNGST Act,1959.

18. Payment details of Registration fee:

Amount	DD/ Crossed cheque / Banker's cheque No.	Date	Name of the Bank	Branch code

DECLARATION

I / We * _____ do hereby declare that the particulars furnished in the application above are true, correct and complete to the best of my knowledge and belief.

Place :*

Date :*

Signature of the applicant*

Name :*

Status & Relationship to the firm:*

Seal

(* marked are compulsory)