

First person :

Name :																				
Address :																				
Telephone :																				
Mobile :																				
Fax :																				
E-Mail :																				

Second Person :

Name :																				
Address :																				
Telephone :																				
Mobile :																				
Fax :																				
E-Mail :																				

14. Address of all Branch offices within Mizoram:

First Branch:

Second Branch:

15. Registration Numbers of the Branch Offices outside Mizoram (if any) :

First Branch:

a) Under the State Act:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

b) Under the Central Sales Tax Act, 1956:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Second Branch:

a) Under the State Act:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

b) Under the Central Sales Tax Act, 1956:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

16. Addresses & Telephone Numbers of all warehouses in Mizoram*:

First Warehouse:

(i) Address:																				
(ii) Telephone Number :																				

Second Warehouse:

(i) Address:																				

(ii) Telephone Number :																			
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17. Nature of Business*

--	--

If 01, please specify the name of the commodity or commodities :

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

If 13, please specify the name of the commodity or commodities :

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

18. Number of the Registration Certificate under The Indian Companies Act, 1956:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

19. Class or classes of goods purchased or intended to be purchased for the purpose of:
a) Resale of taxable goods in Mizoram:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

(b) Raw materials required for the purpose of manufacture of taxable goods in Mizoram:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

20. Where the applicant's business includes loans and advances, particulars thereof :

Name of the lender	Address and telephone Nos. of the lender	PAN No. of the lender	Amount of loan in Rs.

21. Details of Bank Account:

First Bank:

Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Branch

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Address

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Second Bank:

Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Branch

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Address

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

22. Registration Number (if any) under the Mizoram (Sales of Petroleum and Petroleum Products Including Motor Spirits and Lubricants) Taxation Act, 1973 :

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

23. PAN/TAN of the Firm under the Income Tax Act, 1979 (if any):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

24. Total amount of purchases and sales and contractual transfer price of Goods in:

- (a) **Last Year:**
 - (i) Purchases (Rs.) :
 - (ii) Sales (Rs.) :
 - (iii) C.T.P. (Rs.) :
- (b) **Last Quarter:**
 - (i) Purchases (Rs.) :
 - (ii) Sales (Rs.) :
 - (iii) C.T.P. (Rs.) :

25. Date of commencement of purchase and sale and Works contract :

- (a) Purchase :

D	D	M	M	Y	Y
- (b) Sale :

D	D	M	M	Y	Y
- (c) Works contract :

D	D	M	M	Y	Y

I,.....do hereby declare that the above statements are true to the best of my knowledge and belief .

Date..... Signature.....
 Status

 Please use separate sheet wherever space is inadequate.

Information for filling up the application for registration form.

01. Strike off whichever is not applicable.
02. Strike off whichever is not applicable.
03. Please write your registration number in the appropriate box.
04. Please enter the name of the applicant in the order of surname first, middle name second and then first name in the appropriate box.
05. Strike off whichever is not applicable.
06. Please enter the name of the father or husband of the applicant.
07. Please enter the name under which the business trades. If the business trades under own name, enter the name first, then middle name and surname.
08. Please enter the address in the appropriate box beginning with the room/flat number followed by Premises Number and Street, City/Town, District, Postal Index Number and name of the Municipal/Local Body.
09. Fill in the boxes with the appropriate code (given below) that identifies your occupancy status :

01 Owned	02 Rented	03 Leased	04 Rent-free	05 Others
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10. Please enter the two digit code that identifies the status of your business from the selection below :-

01 Proprietary	02 Unregistered Partnership	03 Registered Partnership	04 Private Limited Company
05 Public Limited Company	06 Public Sector Inventory	07 Government Company	08 Statutory Body
09 Co-operative Society	10 Trust	11 Hindu Undivided Family	12 Other

11. Please write the number of partners.
12. Please write names of the two persons.
13. Status in relation to the business of may of the two contact persons may be stated.
14. Please enter the address of the two contact persons in the appropriate boxes.
15. Please mention the telephone number, mobile number, fax number, E-mail number of the two contact persons in the appropriate boxes.
16. Please enter the address of the two branches in the appropriate boxes. If there are more than two branches, please use a separate sheet.
17. Please enter the registration number under the respective State Act and the Central Sales Tax Act, 1956 of the two branches in the appropriate boxes. If there are more than two branches, please use a separate sheet.
18. Please enter the address and telephone numbers of two warehouses in the appropriate boxes. If there are more than two warehouses, please use a separate sheet.
19. Please enter the two digit code from the following list which best describes your business.

01. Manufacturer	02. Distributor	03. Agency	04. Wholesaler
05. Retailer	06. Auctioneer	07. Works Contractor	08. Transferor of right to use goods
09. Hire Purchaser	10. Hotelier	11. Club	12. Services
13. Importer	14. Exporter	15. Others	

20. Please write the number in the appropriate boxes.
21. In case you are a reseller, please enter the names of the major commodities in which you deal and packing materials or containers for such taxable goods.
In case you are a manufacturer of taxable goods, please enter the names of the raw materials, consumable stores and containers or packing materials for such goods.
22. Please write the particulars of the person or agency or institution, as the case may be, from which loans or advances have been received by you.
23. Please enter name, branch and address of the banks where the accounts are maintained. If you have accounts in more than three branches, please use a separate sheet.
24. to 25. Please enter the number in the appropriate box.
25. Please write the Certificate of Enlistment number and the date of issue of such certificate in the appropriate boxes. For example, if the date of issue is 1st June, 2003, please write 01 against DD, 06 against MM and 03 against YY.
26. Please state the purchase amount, sales amount and amount representing contractual transfer of goods against appropriate column.
27. Please write the dates as per procedure prescribed in serial no.26 above.
28. Please write the exact amount of purchases, sales or contractual transfer price in the appropriate column.
29. Please write the dates as indicated.