

Serial No

Application for registration will not be accepted if the same is not complete in all respects and the required documents are not submitted along with the application

FORM 101

(See Rule 8)

Application for Registration under section 16 of The Maharashtra Value Added Tax Act, 2002

To

I hereby apply for grant of registration certificate under section 16 of The Maharashtra Value Added Tax Act, 2002

1) Name of the Applicant (in block letters)

2) Name and style of business (in block letters)

3) Full address of the principal place of business

Pin code

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a) Telephone No. (with STD code)

b) Fax No (with STD code)

c) Email address

4) Occupancy status of the principal place of the business (Please tick the appropriate box)

Owned	Rented	Leased	Rent free
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Others (please specify)			
<hr/>		<hr/>	

5) Full address of the additional place(s) of business / Godown(s) / Warehouse(s)

(If space is insufficient please attach separate statement)

6) Constitution (Please tick the appropriate box)

Proprietary	Partnership	Pvt. Ltd. Co.	Public Ltd. Co.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>