Form GST REG-26

[See rule 24(2)]

Application for Enrolment of Existing Taxpayer							
Taxpay	Taxpayer Details						
1. Prov	1. Provisional ID						
	l Name (As per Permanent t Number)						
3. Lega	l Name (As per State/Center)	,					
4. Trad	le Name, if any						
5. Perm Busines	anent Account Number of						
6. Cons	titution						
7. State							
7A Sect applical	tor, Circle, Ward, etc. as ble						
7B. Cer	nter Jurisdiction						
8. Reason of liability to obtain RegistrationRegistration under earlier law							
9. Exist	ing Registrations	I					
Sr. No.	Type of Registration		Registration Number	Date of Registration			
1	TIN Under Value Added	Tax					
2	Central Sales Tax Registr	ation Number					
3	Entry Tax Registration N	umber					
4	Entertainment Tax Regist	ration Number					
5	Hotel And Luxury Tax R	egistration Number					
6	Central Excise Registration	on Number					
7	Service Tax Registration	Number					
8	Corporate Identify Number/Foreign Company Registration						
9	Limited Liability Partners Number/Foreign Limited Identification Number						
10	Import/Exporter Code Nu	ımber					
11	Registration Under Duty Medicinal And Toiletry A						
12	Others (Please specify)						

10. Details of Principal Place of Business									
Building No. /	Flat No.				Floor No				
Name of the P	remises/Building				Road/Street				
Locality/Villa	/Village			District					
State					PIN Code				
Latitude					Longitude				
Contact Inform	nation	1							
Office Email A	Address				Office-Telephone Nur	nber			
Mobile Numb	er				Office Fax No				
10A. Nature o	f Possession of Pren	nises	(Own; I	Leased	l; Rented; Consent; Sha	red)			
10B. Nature o	f Business Activities	being carri	ed out						
Factory / Man	ufacturing O	Wholesale	Business	° O	Retail Business	War	ehouse/I	Depot	0
Bonded Warel	house	Service Pr	ovision	0	Office/Sale Office	Leas	sing Busi	iness	0
Service Recip	ient	EOU/ STE	P/ EHTP	0	SEZ	Inpu	t Service	e Distribut	or (ISD)
Works Contra	ct O	Others (Sp	pecify)	0					Ŭ
11. Details of	Additional Places of	Business							
Building No/F	Flat No				Floor No				
Name of the P	Premises/Building				Road/Street				
Locality/Villa	ge				District				
State					PIN Code				
Latitude (Opti	onal)				Longitude(Optional)				
Contact Inform	nation	I			I		1		
Office Email A	Address			Offic	ce Telephone Number				
Mobile Numb	er			Offic	ice Fax No				
11A.Nature of	Possession of Prem	ises	(Own;	Lease	ed; Rented; Consent; Sh	ared)			
11B.Nature of	Business Activities	being carrie	ed out						
Factory / Man	ufacturing	Wholesale	Business	s 🔿	Retail Business	War	ehouse/I	Depot	0
Bonded Warehouse Service Provision			Office/Sale Office	Leas	sing Busi	iness	0		
Service Recipient O EOU/ STP/ EHTP			SEZ	Inpu	t Service	e Distribut	or (ISD) 🔿		
Works Contract Others (Specify)									
Add More									
12. Details of Goods/ Services supplied by the Business									
Sr. No.	Description of Goo	ods					HSN C	ode	

Sr. No.	Description of Serv	ription of Services				HSN C	Code				
13. Total Ba	nk Accounts maintain	ed by y	ou for conduc	ting B	Business						
Sr. No.	Account Number	Туре	of Account	IFSC		Bai	nk Nam	e	Brar	ich Ad	ldress
	of Proprietor/all Pa f Associations/Board			ng Di	rectors and	d wh	ole tin	ne Dire	ctor/Me	ember	s of Managin
Name		<first< td=""><td>t Name></td><td><mi< td=""><td>ddle Name:</td><td>></td><td></td><td><last< td=""><td colspan="2">st Name></td><td></td></last<></td></mi<></td></first<>	t Name>	<mi< td=""><td>ddle Name:</td><td>></td><td></td><td><last< td=""><td colspan="2">st Name></td><td></td></last<></td></mi<>	ddle Name:	>		<last< td=""><td colspan="2">st Name></td><td></td></last<>	st Name>		
Name of Fat	her/Husband	<first< td=""><td>t Name></td><td><mi< td=""><td>ddle Name></td><td>></td><td></td><td><last< td=""><td>Name></td><td>></td><td><photo></photo></td></last<></td></mi<></td></first<>	t Name>	<mi< td=""><td>ddle Name></td><td>></td><td></td><td><last< td=""><td>Name></td><td>></td><td><photo></photo></td></last<></td></mi<>	ddle Name>	>		<last< td=""><td>Name></td><td>></td><td><photo></photo></td></last<>	Name>	>	<photo></photo>
Date of Birth	DD/ MM/ YYYY	Gende	er			<1	Male, F	emale, (Other>		
Mobile Num	ber			Email Ad							
Telephone N	umber										
Identity Info	rmation							I			
Designation		Direc	tor Identificat	ion Nı	umber						
Permanent Account Number		Aadha	aar Number								
Are you a cit	izen of India?		<yes no=""></yes>		Passport 1	Num	ber				
Residential A	Address										
Building No/	/Flat No				Floor No						
Name of the	Premises/Building				Road/Stre	eet					
Locality/Vill	age				District	.ct					
State					PIN Code	e					
15. Details o	f Primary Authorised	Signato	ory		1			I			
Name		<first< td=""><td>t Name></td><td colspan="2"><middle name=""> <</middle></td><td colspan="2"><last name=""></last></td><td>></td><td></td></first<>	t Name>	<middle name=""> <</middle>		<last name=""></last>		>			
Name of Father/Husband <first name=""></first>		<middle name=""></middle>		<last name=""></last>		>					
Date of Birth	Birth DD / MM / YYYY			Gender <male,< td=""><td colspan="2">e, Female, Other></td><td>r></td><td><photo></photo></td></male,<>		e, Female, Other>		r>	<photo></photo>		
Mobile Number			Ema	il Address	1						
Telephone N	umber										
Identity Info	rmation										
Designation				Director Identification Number							

Permanent Account Number		Aadhaar Number	
Are you a citizen of India?	<yes no=""></yes>	Passport Number	
Residential Address			
Building No/Flat No		Floor No	
Name of the Premises/Building		Road/Street	
Locality/Village		District	
State		PIN Code	
Add More			

List of Documents Uploaded

A customized list of documents required to be uploaded as per the field values in the form should be auto-populated with provision to upload relevant document against each entry in the list. (Refer instruction)

16. Aadhaar Verification

I on behalf of the holders of Aadhaar numbers provided in the form, give consent to "Goods and Services Tax Network" to obtain 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 Aadhaar holder and will be shared with Central Identities Data Repository only for the purpose of authentication.

17. Declaration

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.

Digital Signature/E-Sign

Name of the Authorised	Place	
Signatory		
Designation of Authorised	Date	
Signatory		

Instructions for filing of Application for enrolment

- Every person, other than a person deducting tax at source or an Input Service Distributor, registered under an existing law and having a Permanent Account Number issued under the Income-tax Act, 1961 (Act 43 of 1961) shall enroll on the common portal by validating his e-mail address and mobile number.
- 2. Upon enrolment under clause (a), the said person shall be granted registration on a provisional basis and a certificate of registration in **FORM GST REG-25**, incorporating the Goods and Services Tax Identification Number therein, shall be made available to him on the common portal:
- 3. Authorisation Form:-

For each Authorised Signatory mentioned in the application form, Authorisation or copy of Resolution of the Managing Committee or Board of Directors to be filed in the following format:

Declaration for Authorised Signatory (Separate for each signatory)

I ----

(Details of Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc)

1. << Name of the Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc>>

2.

3.

hereby solemnly affirm and declare that <<name of the authorised signatory>> to act as an authorised signatory for the business << Goods and Services Tax Identification Number - Name of the Business>> for which application for registration is being filed/ is registered under the Central Goods and Service Tax Act, 2017.

All his actions in relation to this business will be binding on me/ us.

Signatures of the persons who are Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc.

S. No. Full Name Designation/Status Signature

1.

2.

Acceptance as an authorised signatory

I <<(Name of the	authorised	signatory>>	hereby	solemnly	accord	my	acceptance	to act	as	authorised
signatory for the abo	ve referred	business and	all my a	cts shall be	e bindin	g on	the business			
							Signature	of		Authorised
Signatory										
								Desi	onati	ion/Status
_								Desig	Snat	ion/ Diatas
Date										
Place										

Instructions for filing online form

- Enter your Provisional ID and password as provided by the State/Commercial Tax/Central Excise/Service Tax Department for log in on the GST Portal.
- Correct Email address and Mobile number of the Primary Authorised Signatory are to be provided. The Email address and Mobile Number would be filled as contact information of the Primary Authorised Signatory.
- E mail and Mobile number to be verified by separate One Time Passwords. Taxpayer shall change his user id and password after first login.
- Taxpayer shall require to fill the information required in the application form related details of Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees, Principal Place of Business and details in respect of Authorised signatories.
- Information related to additional place of business, Bank account, commodity in respect of goods and services dealt in (top five) are also required to be filled.
- Applicant need to upload scanned copy of the declaration signed by the Proprietor/all Partners/Karta/Managing Directors and whole time Director/Members of Managing Committee of Associations/Board of Trustees etc. in case he/she declares a person as Authorised Signatory as per Annexure specified. Documents required to be uploaded as evidence are as follows:-

1.	Photographs wherever specified in the Application Form (maximum 10)
	Proprietary Concern – Proprietor
	Partnership Firm / Limited Liability Partnership – Managing/ Authorised
	Partners (personal details of all partners is to be submitted but photos of only ten partners including
	that of Managing Partner is to be submitted)
	Hindu Undivided Family – Karta
	Company – Managing Director or the Authorised Person

	Trust – Managing Trustee Association of Person or Body of Individual –Members of Managing Committee (personal details of all members is to be submitted but photos of only ten members including that of Chairman is to be submitted) Local Body – Chief Executive Officer or his equivalent Statutory Body – Chief Executive Officer or his equivalent Others – Person in Charge
2.	Constitution of business: Partnership Deed in case of Partnership Firm, Registration Certificate/Proof of Constitution in case of Society, Trust, Club, Government Department, Association of Person or Body of Individual, Local Authority, Statutory Body and Others etc.
3.	 Proof of Principal/Additional Place of Business: (a) 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. (b) 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. (c) For premises not covered in (a) and (b) above – A copy of the Consent Letter with any document in support of the premises of the premises of the Consenter like Municipal Khata copy or Electricity Bill copy. For shared properties also, the same documents may be uploaded.
4	Bank Account Related Proof: Scanned copy of the first page of Bank passbook / one page of Bank Statement Opening page of the Bank Passbook held in the name of the Proprietor / Business Concern – containing the Account No., Name of the Account Holder, MICR and IFSC and Branch details.
5	For each Authorised Signatory: Letter of Authorisation or copy of Resolution of the Managing Committee or Board of Directors to that effect as specified.

• After submitting information electronic signature shall be required. Following person can electronically sign application for enrolment:-

Constitution of Business	Person who can digitally sign the application
Proprietorship	Proprietor
Partnership	Managing / Authorised Partners
Hindu Undivided Family	Karta
Private Limited Company	Managing / Whole-time Directors and Managing Director/Whole Time Director/ Chief Executive Officer
Public Limited Company	Managing / Whole-time Directors and Managing Director/Whole Time Director/ Chief Executive Officer
Society/ Club/ Trust/ AOP	Members of Managing Committee
Government Department	Person In charge
Public Sector Undertaking	Managing / Whole-time Director and Managing Director/Whole Time Director/ Chief Executive Officer
Unlimited Company	Managing/ Whole-time Director and Managing Director/Whole Time Director/ Chief Executive

	Officer
Limilted Liability Partnership	Designated Partners
Local Authority	Chief Executive Officer or Equivalent
Statutory Body	Chief Executive Officer or Equivalent
Foreign Company	Authorised Person in India
Foreign Limited Liability Partnership	Authorised Person in India
Others	Person In charge

• Application is required to be mandatorily digitally signed as per following :-

Sl. No	Type of Applicant	Digital Signature required				
1.	Private Limited CompanyPublic Limited CompanyPublic Sector UndertakingUnlimited CompanyLimited Liability PartnershipForeign CompanyForeign Limited Liability Partnership	Digital Signature Certificate(DSC) Class 2 and above				
2.	Other than above	Digital Signature Certificate class 2 and above e-Signature				

Note :- 1. Applicant shall require to register their DSC on common portal. 2. e-Signature facility will be available on the common portal for Aadhar holders.

All information related to Permanent Account Number, Aadhaar, Director Identification Number, Challan Identification Number, Limited Liability Partnership Identification Number shall be online validated by the system and Acknowledgment Reference Number will be generated after successful validation of all the filled up information.

Status of the online filed Application can be tracked on the common portal.

- 1. Authorised signatory should not be minor.
- 2. No fee is applicable for filing application for enrolment.

Acknowledgement

Enrolment Application - Form GST- has been filed against Application Reference Number (ARN) <>.						
Form Number	:	<>				
Form Description:	<appli< td=""><td colspan="5"><application enrolment="" existing="" for="" of="" taxpayers=""></application></td></appli<>	<application enrolment="" existing="" for="" of="" taxpayers=""></application>				
Date of Filing	:	<dd mm="" yyyy=""></dd>				
Taxpayer Trade Name	:	<trade name=""></trade>				
Taxpayer Legal Name	:	<legal as="" by="" center="" name="" shared="" state=""></legal>				
Provisional ID Number	:	<provisional id="" number=""></provisional>				
It is a system generated acknowledgement and does not require any signature						