FORM GST REG-26

[See rule 24(2)]

	Арј	plication for Enrol	ment of Existing Taxpa	yer
Тахрау	yer Details			
1. Prov	visional ID			
	al Name (As per Permanent			
	nt Number)			
3. Lega	al Name (As per State/Center)			
4. Tra	de Name, if any			
5. Pern Busine	nanent Account Number of ss			
6. Con	stitution			
7. State	2			
7A Sec applica	ctor, Circle, Ward, etc. as			
7B. Ce	enter Jurisdiction			
8. Reas Registr	son of liability to obtain ration	Registration under ear	lier law	
9. Exis	ting Registrations			
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	tration Number		
5	Hotel And Luxury Tax R	egistration Number		
6	Central Excise Registration	on Number		
7	Service Tax Registration	Number		
8	Corporate Identify Numb Registration	er/Foreign Company		
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 B	usiness				I		
Building No. /Flat No.			Floor No				
Name of the Premises/Building			Road/Street				
Locality/Village			District				
State			PIN Code				
Latitude			Longitude				
Contact Information	1		l		1		
Office Email Address			OfficeTelephone Num	ber			
Mobile Number			Office Fax No				
10A. Nature of Possession of Prer	nises (Own	; Leased	d; Rented; Consent; Shar	red)			
10B. Nature of Business Activitie	s being carried out						
Factory / Manufacturing	Wholesale Busine	ess O	Retail Business	War	ehouse/D	Depot	0
Bonded Warehouse	Service Provision	0	Office/Sale Office	Leas	sing Busi	ness	0
Service Recipient	EOU/ STP/ EHTI	P ()	SEZ	Inpu	ıt Service	Distribut	or (ISD)
Works Contract	Others (Specify)	0					
11. Details of Additional Places of	Business						
Building No/Flat No			Floor No				
Name of the Premises/Building			Road/Street				
Locality/Village			District				
State			PIN Code				
Latitude (Optional)			Longitude(Optional)				
Contact Information			1		I		
Office Email Address		Offi	ce Telephone Number				
Mobile Number		Offi	ce Fax No				
11A.Nature of Possession of Prem	ises (Ow	n; Leas	ed; Rented; Consent; Sh	ared)			
11B.Nature of Business Activities being carried out							
Factory / Manufacturing	Wholesale Busine	ess	Retail Business	War	ehouse/D	Depot	0
Bonded Warehouse	Service Provision	0	Office/Sale Office	Leas	sing Busi	ness	0
Service Recipient O EOU/ STP/ EHTP O			SEZ	Inpu	ıt Service	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	vices							HSN Code	
13. Total Ban	k Accounts maintain	ed by y	ou for conduc	cting B	Business					
Sr. No.	Account Number	Туре	of Account	IFSC	C	Ва	ank Nam	ie	Branch A	Address
	of Proprietor/all Pa f Associations/Board		•	ng Di	rectors and	d w	hole tin	ne Dire	ctor/Membe	ers of Managir
Name		<firs< td=""><td>t Name></td><td><mi< td=""><td>ddle Name></td><td>></td><td></td><td><last< td=""><td>Name></td><td><photo></photo></td></last<></td></mi<></td></firs<>	t Name>	<mi< td=""><td>ddle Name></td><td>></td><td></td><td><last< td=""><td>Name></td><td><photo></photo></td></last<></td></mi<>	ddle Name>	>		<last< td=""><td>Name></td><td><photo></photo></td></last<>	Name>	<photo></photo>
Name of Fath	ner/Husband	<firs< td=""><td>t Name></td><td><mi< td=""><td>ddle Name></td><td>></td><td></td><td><last< td=""><td>Name></td><td></td></last<></td></mi<></td></firs<>	t Name>	<mi< td=""><td>ddle Name></td><td>></td><td></td><td><last< td=""><td>Name></td><td></td></last<></td></mi<>	ddle Name>	>		<last< td=""><td>Name></td><td></td></last<>	Name>	
Date of Birth	DD/ MM/ YYYY	Gend	er	1		<	Male, F	emale, (Other>	
Mobile Numb	ber			Ema	il Address					
Telephone Nu	umber									
Identity Infor	mation	•						•		
Designation	Director Identifica			tion Nu	umber					
Permanent Account Number		Aadh	aar Number							
Are you a citi	izen of India?		<yes no=""></yes>		Passport N	Nur	nber			
Residential A	ddress		I							
Building No/	Flat No				Floor No					
Name of the l	Premises/Building				Road/Stre	eet				
Locality/Villa	age			District						
State					PIN Code	e				
	Primary Authorised	-	-							
Name			t Name>	<middle name=""></middle>				Name>		
Name of Father/Husband			t Name>		ddle Name>	> <last< td=""><td>Name></td><td>Dhatas</td></last<>		Name>	Dhatas	
Date of Birth		DD / YYY			Gender		<male, female,="" other=""></male,>		<photo></photo>	
Mobile Numb	oer			Ema	il Address					
Telephone N	umber									
Identity Infor	mation									

Designation		Dire	Director Identification Number				
Permanent Account Number			Aad	haar Number			
Are you a citizen of India?	e 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		<u> </u>			I		

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 Signatory	Place	
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 above referred business and all my acts shall be binding on the business.
Signature of Authorised Signatory
Designation/Status
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 theProprietor/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 ownership of the premises of the Lessor Letter with any document in support of the ownership of the premises of the Consent Letter with any document in support of the ownership of the premises of the Consent Letter with any document in support of the ownership of the premises of the Consent Letter with any document in support of the ownership of the premises of the Consent Letter with any document in support of the ownership of the premises of the Consent Letter with any document in support of the ownership of the premises 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.
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 :- I. 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 GS	ST- has been filed against Application Reference Number (ARN) <>.		
Form Number	:	<>		
Form Description:	<appl< td=""><td>ication for Enrolment of Existing Taxpayers></td></appl<>	ication for Enrolment of Existing Taxpayers>		
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				