

ASSAM VALUE ADDED TAX RULES, 2005
FORM-10
[See Rule 16(2)]

Affix passport size photograph of Applicant
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APPLICATION FOR REGISTRATION OF TRANSPORTER

I, _____ son of _____ on behalf of the transporter, carrier or transporting agent carrying on transport business in Assam, whose particulars are given below, hereby apply for registration under section 28 of the Assam Value Added Tax Act, 2003.

1. Name and style with full postal address of the transporter, carrier or transporting agent with Telephone number, if any.

2. Name, designation and address of the principal officer or manger in charge of the affairs of the business.

3. Location of the principal office/place of business:-

(i) Name of the building if any

(ii) Name of the owner of the building

(iii) Municipal Holding No. :

(iv) Ward No. :

(v) Name of the road/street :

(vi) Name of the town :

(vii) Post Office

(vii) Police Station

(ix) District

4. Location or branches/other places of business
(a separate sheet may be enclosed, if necessary) :-

Particulars of branches	Branch-I	Branch-II	Branch-III
(i) Name of the building, if any			
(ii) Name of owner of building			
(iii) Municipal holding No.			
(iv) Ward No.			
(v) Name of the road/street			
(vi) Name of the town			
(vii) Post Office			
(vii) Police Station			
(ix) District			

5. Location of godowns/warehouses”
(attach separate sheet, if necessary)

(a) For principal office

Name of the principal office	Location of godowns		
	Godown-I	Godown-II	Godown-III

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(b) For branch (es)

Name of the Branch	Location of godowns		
	Godown-I	Godown-II	Godown-III

6. Date of commencement of business.

7. Whether it is a proprietorship business/partnership business/company/co-operative society/club/association of persons/H.U.F/Govt. Department Public Sector Undertaking etc. (give full details):-

8. Name (s) and address (es) of the Proprietor/Partners/Directors/Members/Karta/Head of Office etc. :-

Sl.No.	Name	Father's/ Husband's Name	Designation	Age	Permanent Address	Present Address	Signature
1.							
2.							
3.							
4.							
5.							

9. Permanent Account Number or GIR Number under the Indian Income Tax Act, if any, with name of the office, Circle/ward etc., where Income Tax assessment is made.

10. Details of Bankers, with following particulars:-

Sl. No.	Name & address of the Bank Branch	In whose name the account stands	Whether saving or current account	Account Number

11. Full address of the Head Office, if situated outside Assam.

12. The language in which books of accounts are maintained

13. The accounting year followed by the applicant

14. Full address of the place where books of accounts are kept

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

Place _____

Signature