

FORM-103

(See rule 11)

Application for cancellation of Registration Certificate under Section 16 of The Maharashtra Value Added Tax Act, 2002

To

Subject:- Application for cancellation of Registration Certificate under section 16 of The Maharashtra Value Added Tax Act, 2002

I, the undersigned hereby apply for the cancellation of Registration Certificate issued or deemed to have been issued under the Maharashtra Value Added Tax Act, 2002. The details are as follows :

1) Registration certificate number under MVAT Act, 2002	<hr/>
2) Registration certificate number under CST Act,1956	<hr/>
3) Name and style of the business	<hr/>
4) Name and the status of the applicant	<hr/>
5) Address of the principal place of business	<hr/> <hr/> <hr/>
Telephone No (with STD Code)	<hr/>
Fax No.(with STD code)	<hr/>
e-mail	<hr/>
6) Address for correspondence, if it is different from the address given at Sr. No.5	<hr/> <hr/> <hr/>
Telephone No (with STD Code)	<hr/>

Fax No.(with STD code) _____

e-mail _____

7) Application for cancellation of the certificate of registration under the Maharashtra Value Added Tax Act 2002, is on account of __

(a) * the said business having been discontinued with effect from _____

(b) * the said business having been transferred to M/s _____
in accordance with the section 44 with effect from _____

(c) *Change in the ownership of the said business as follows: -

(d) *the additional place of business having been discontinued with effect from _____
(Clause (d) is deleted by Notification No. STR-1506/CR-38/Taxation-1 Dt.08.09.2006)

(e) *the place of business has been shifted to the following address :

(Clause (e) is deleted by Notification No. STR-1506/CR-38/Taxation-1 Dt.08.09.2006)

(f) *the turnover of sales and the turnover of purchases of the said business during the year _____ having failed to exceed the threshold limit specified in section 3 (4), the details of which are as follows:-

Period	The turnover of all sales of all places of business In Maharashtra		The turnover of all purchases of all places of business in Maharashtra	
	Taxable goods (Rs.)	Tax free goods(Rs.)	Taxable goods(Rs.)	Tax free goods(Rs.)
(1)	(2)	(3)	(4)	(5)

(h) *Other reasons (Please Specify)

Declaration :

I, _____ hereby solemnly declare that what is stated herein above is true to the best of my knowledge and belief.

Date _____ Signature _____

Place _____ Status _____

***Strike out whichever phrase/clause is not applicable**

ACKNOWLEDGEMENT

Name of the Applicant	
Name and Style of Business	
Registration Certificate No. under MVAT Act, 2002	
Received application in Form-103 for cancellation of the Certificate of Registration issued under the MVAT ACT, 2002	
Date _____ Place _____	Signature of the Receiving Officer _____ Designation _____