

Form DVAT 04 – Cover Page

(See Rule 12 of the Dadra & Nagar Haveli Value Added Tax Rules, 2005)

Application for Registration under Dadra & Nagar Haveli Value Added Tax Regulation, 2005

Checklist of Supporting Documents

Please tick as applicable

Mandatory Supporting Documents

- Annexures of the Form duly filled in (in case any of the annexures is not applicable, please mention the same)
- Proof of incorporation of the applicant dealer i.e. Copy of deed of constitution (partnership deed (if any), certificate of registration under the Societies Act, Trust deed, Memorandum and Articles of Association etc) duly certified by the authorised signatory
- Proof of identity of authorised signatory signing the Registration Application Form
- Two self addressed envelopes (Without stamps)
- In case of a dealer applying for registration and simultaneously opting for payment of tax under composition scheme, please attach application in Form DVAT 01 along with this application
- Proof of Security

Optional Supporting Documents (For reduction in Security Amount)

- Proof of ownership of principle place of business
- Proof of ownership of residential property by proprietor/ managing partner
- Copy of passport of proprietor/ managing partner
- Copy of Permanent Account Number in the name of the business allotted by the Income Tax Department
- Copy of last electricity bill (The bill should be in the name of the business and for the address specified as the main place of business in the registration form)
- Copy of last telephone bill (The bill should be in the name of the business and for the address specified as the main place of business in the registration form)

Reasons for Rejection (For Office Use Only)

Please tick as applicable

- Not attached Mandatory Supporting Document(s) _____
- Other _____

7. Date from which liable for registration under Dadra & Nagar Haveli Value Added Tax Regulation, 2005			/			/		
	Day			Month			Year	

8. Permanent Account Number of the applicant dealer (PAN)																		
9. Registration number under Central Excise Act (if applicable)																		

10. Principle Place of Business	Building Name/ Number																	
	Area/ Road																	
	Locality/ Market																	
	Pin Code																	
	Distict																	
	Email Id																	
	Telephone Number																	
	Fax Number																	

11. Address for service of notice <i>(If different from principle place of business)</i>	Building Name/ Number																	
	Area/ Road																	
	Locality/ Market																	
	Pin Code																	
	Email Id																	
	Telephone Number																	
	Fax Number																	

12. Number of additional places of business within or outside the state <i>(also please complete Annexure II)</i>	Godown / Warehouse		
	Factory		
	Shop		
	Other place(s) of business		

13. Details of main Bank Account	Account Number																			
	MICR Number																			
	Name of Bank																			
	Address of Bank																			

14. Details of investment in the business (details should be current as on date of application)	Own Capital (Rs.)																			
	Loans from Banks (Rs.)																			
	Other loans and borrowings (Rs.)																			
	Plant & Machinery (Rs.)																			
	Land & Building (Rs.)																			
Other assets & investments (Rs.)																				

15. Description of top 5 items you deal or propose to deal in (1-highest volume to 5-lowest volume)	Description of items
1	
2	
3	
4	
5	

16. Accounting Basis Tick one Accrual Cash

17. Frequency of filing of returns (to be filled in by the dealer whose turnover is less than Rs. 5 crores in the preceeding year) Tick one if applicable Monthly Quarterly

10. Residential Address <i>(If different from principle place of business)</i>	Building Name/ Number																						
	Area/ Road																						
	Locality/ Market																						
	Pin Code																						
	Telephone Number																						
	Fax Number																						

11. Permanent Address <i>(If different from residential address)</i>	Building Name/ Number																						
	Area/ Road																						
	Locality/ Market																						
	Pin Code																						
	Telephone Number																						
	Fax Number																						

12. Verification																							
I/We _____ hereby solemnly affirm and declare that the information given hereinabove is true and correct to the best of my/our knowledge and belief and nothing has been concealed therefrom.																							
Signature of Authorised Signatory												_____											
Full Name <i>(first name, middle, surname)</i>												_____											
Designation												_____											

Place																							
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Date			/			/				
	Day			Month			Year			

Type															
<input type="checkbox"/> Godown / Warehouse				<input type="checkbox"/> Factory				<input type="checkbox"/> Shop				<input type="checkbox"/> Other place of business			
Address	Building Name/ Number														
	Area/ Road														
	Locality/ Market														
	Pin Code														
	Email Id														
	Telephone Number														
	Fax Number														
	Date of establishment					/			/						
				Day		Month		Year							
State local sales tax/VAT/CST registration number															
<i>(if place of business is situated outside Dadra & Nagar Haveli)</i>															

Type															
<input type="checkbox"/> Godown / Warehouse				<input type="checkbox"/> Factory				<input type="checkbox"/> Shop				<input type="checkbox"/> Other place of business			
Address	Building Name/ Number														
	Area/ Road														
	Locality/ Market														
	Pin Code														
	Email Id														
	Telephone Number														
	Fax Number														
	Date of establishment					/			/						
				Day		Month		Year							
State local sales tax/VAT/CST registration number															
<i>(if place of business is situated outside Dadra & Nagar Haveli)</i>															

10. Residential Address <i>(If different from principle place of business)</i>	Building Name/ Number																		
	Area/ Road																		
	Locality/ Market																		
	Pin Code																		
	Telephone Number																		
	Fax Number																		

11. Permanent Address <i>(If different from residential address)</i>	Building Name/ Number																		
	Area/ Road																		
	Locality/ Market																		
	Pin Code																		
	Telephone Number																		
	Fax Number																		

12. Declaration I/We _____ hereby solemnly affirm and declare that the person named above is authorised to act as an authorised signatory for the above referred business for which application for registration is being filed/ is registered under the Dadra & Nagar Haveli VAT Regulation, 2005. All his actions in relation to this business will be binding on us. S.No. Full Name <i>(First name, Middle Name, Surname)</i> Designation Signature

Instructions for filling Registration Form (DVAT-04) (For details refer to Section 19 and Rule 12)

1. Please fill in all the details in CAPITAL letters.
2. Please note that you are **mandatorily** required to register if you:
 - (i) had turnover of more than Rupees 5 lakhs in the preceding financial year; or
 - (ii) exceed turnover of Rupees 5 lakhs in the current year; or
 - (iii) are liable to pay tax, or are registered or required to be registered under Central Sales Tax Act, 1956
3. Please note that irrespective of the quantum of turnover of the business, a dealer may apply for voluntary registration under the Dadra & Nagar Haveli Value Added Tax Regulation, 2005.
4. For field 3, an **“importer”** means -
 - (i) a person who brings his own goods into Dadra & Nagar Haveli; or
 - (ii) a person on whose behalf another person brings goods into Dadra & Nagar Haveli; or
 - (iii) in the case of a sale occurring in the circumstances referred to in sub-section 2 of section 6 of the Central Sales Tax Act, 1956, the person in Dadra & Nagar Haveli to whom the goods are delivered
5. The application for registration under this Regulation should be filed within **30 days** from the date of person becoming liable for payment of tax.
6. For **field 8**, if the business does not have a PAN, then please mark ‘Applied for’ or ‘N/A’ as applicable.
7. For **field 15**, please fill the description of top 5 items on the basis of value of goods sold.
8. In case any of these details change, the dealer is required to intimate the department of the amendments within **one month** of the change.
9. The form has to be filled and signed by the authorised signatory of the business.
10. Businesses with a turnover of more than Rs 5 crores are mandatorily required to file returns every month. Businesses with a turnover of less than Rs 5 crores are required to file returns every quarter. They may however, elect to file their returns every month.
11. Registration application should be verified and signed by the following:
 - (i) in the case of an individual, by the individual himself, and where the individual is absent from India, either by the individual or by some person duly authorised by him in this behalf and where the individual is mentally incapacitated from attending to his affairs, by his guardian or by any other person competent to act on his behalf;
 - (ii) in the case of a Hindu Undivided Family, by a Karta and where the Karta is absent from India or is mentally incapacitated from attending to his affairs, by any other adult member of such family;
 - (iii) in the case of a company or local authority, by the principle officer thereof;
 - (iv) in the case of a firm, by any partner thereof, not being a minor;
 - (v) in the case of any other association, by any member of the association or persons;
 - (vi) in the case of a trust, by the trustee or any trustee; and
 - (vii) in the case of any other person, by some person competent to act on his behalf.

Instructions for filling Registration Form (Annexures I, II and III)

1. In case of partnerships, Annexure I to be filled and signed by the managing partner plus top 4 other partners.
2. In case of companies, Annexure I to be filled and signed by the company secretary, the managing director and 3 other directors.
3. If required, make additional copies of the Annexures and attach with application form for registration (DVAT-04).
4. An amendment would be required each time a person changes (and not when the details of an existing person change)
5. In case of minors, the specimen signature of guardian/ trustee should be furnished.
6. In case of Annexure III, it is to be filled and signed by the person whose details are given in the Annexure.
7. Every sheet filled in the Annexures has to be signed by the same person (authorised signatory) who has signed the registration application.
8. In case any of the Annexures are not applicable, please strike off the same and write ‘Not Applicable’ on the said Annexure.

Method of Calculating Security Amount

Prescribed Security Amount		(Rs)	50,000
Reduction sought (Maximum reduction available Rs. 25,000)		Rebate (Rs)	
1	Proof of ownership of principle place of business		15,000
2	Proof of ownership of residential property by proprietor/ managing partner		10,000
3	Copy of passport of proprietor/ managing partner		5,000
4	Copy of Permanent Account Number in the name of the business allotted by the Income Tax Department		5,000
5	Copy of last electricity bill (The bill should be in the name of the business and for the address specified as the main place of business in the registration form)		5,000
6	Copy of last telephone bill (The bill should be in the name of the business and for the address specified as the main place of business in the registration form)		2,500