

GOVERNMENT OF PAKISTAN
 APPLICATION FOR REGISTRATION UNDER THE SALES TAX ACT 1990
 (FOR CORPORATION/COMPANIES/FIRMS/HUFs/AOPs/INDIVIDUALS/OTHER BUSINESSES)
 The form may be filled in accordance with the appended instructions
 (This form may be used both for New & Existing Taxpayers)
 (Additional sheets may be attached if required)

PART - A

(01) NATIONAL TAX NUMBER (NTN)

(02) SALES TAX REGISTRATION No.
 (To be filled by Existing Taxpayers and by Re-registrants)

(03) IMPORT REGISTRATION No.

PART - B

(04) BUSINESS NAME _____

(05) ADDRESS OF REGISTERED HEAD OFFICE _____

(06) CITY _____ POST CODE

(07) TEL No. _____ FAX No. _____

(08) ADDRESS OF THE PREMISES OF THE PRINCIPAL BUSINESS ACTIVITY _____

(09) ADDRESS WHERE BUSINESS RECORD ARE KEPT _____
 (if different from 08 above)

(10) CITY _____ POST CODE

(11) TEL No. _____ FAX No. _____

PART - C

(12) **BUSINESS ACTIVITY :**
 (Please tick (/) whichever is applicable)

Manufacturer Importer Exporter

Distributor Wholesaler Retailer

Ship Breakers

Note : In case of more than one activities, please tick(/) all applicable boxes.

(13) **PRINCIPAL BUSINESS ACTIVITY** (Please tick ONLY ONE of the categories below) :
 Manufacturer / Importer / Exporter / Distributor / Wholesaler / Retailer / Ship Breakers

(14) **PRIMARY PRODUCT MANUFACTURED/SOLD/IMPORTED/EXPORTED ETC.**

Product _____ PCT Code (For Official Use)

g) TYPE OF COMPANY(Please tick (✓) one of the relevant box applicable below)

<input type="checkbox"/> Domestic Public Company	<input type="checkbox"/> Corporate Body formed under any law in force in Pakistan
<input type="checkbox"/> Foreign Company	<input type="checkbox"/> Domestic Pvt. Ltd. Company
<input type="checkbox"/> Listed on Stock Exchange	<input type="checkbox"/> Domestic Unlisted Public Company
<input type="checkbox"/> Trust	<input type="checkbox"/> Other

(20) LOCAL AUTHORITY

(21) ARTIFICIAL JURIDICAL AUTHORITY

PART - E

(* For Official Use)

(Please fill in relevant option(s) below)

(22) GOODS SUPPLIED AS MANUFACTURER :

a) _____
 b) _____
 c) _____
 d) _____

* P.C.T Code

(23) GOODS EXPORTED :

a) _____
 b) _____
 c) _____
 d) _____

* P.C.T Code

(24) GOODS SUPPLIED AS IMPORTER, WHOLESALER, DISTRIBUTOR , RETAILER or SHIP BREAKER :

a) _____
 b) _____
 c) _____
 d) _____

* P.C.T Code

(25) SALES VALUE DURING LAST 12 MONTHS (Rs.) _____

DECLARATION

I, _____ solemnly declare that to the best of my knowledge & belief, the information given above is correct & complete and I have not been allotted any Sales Tax Number nor I have applied for it elsewhere. I understand that incorrect information can lead to punitive action.

Date	Official Stamp	Authorized Signature
<div style="border: 1px solid black; width: 100px; height: 15px; margin: 0 auto;"></div>	<div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div>	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/>