GOODS AND SERVICES TAX RULES, 2017 GOODS AND SERVICE TAX PRACTITIONER FORMATS



List of Goods and Service Tax Formats

Sr. No.	Form No.	Description
1.	GST PCT - 1	Application for Enrolment as Goods and Service Tax Practitioner
2.	GST PCT-02	Enrolment Certificate for Goods and Service Tax Practitioner
3.	GST PCT-03	Show Cause Notice for disqualification
4.	GST PCT-04	Order of Rejection of Application for enrolment as GST Practitioner/ Or Disqualification to function as GST Practitioner
5.	GST PCT-05	Authorization/withdrawal of authorization of Goods and Service Tax Practitioner.



[See Rule ---]

Application for Enrolment as Goods and Services Tax Practitioner

Part -A

	State /UT - District - V	
(i)	Name of the Goods and Services Tax Practitioner (As mentioned in PAN)	
(ii)	PAN	
(iii)	Email Address	
(iv)	Mobile Number	
Note -	Information submitted above is subject to online verification before proceeding to fill up Part-B.	
	PART B	

1.	Enrolling Authority	Centre
		State
2.	State/UT	
3.	Date of application	
4	Enrolment sought as:	 (1) Chartered Accountant holding COP (2) Company Secretary holding COP (3) Cost and Management Accountant holding COP (4) Advocate (5) Graduate or Postgraduate degree in Commerce (6) Graduate or Postgraduate degree in Banking (7) Graduate or Postgraduate degree in Business Administration (8) Graduate or Postgraduate degree in Business Management (9) Degree examination of any recognized Foreign University (10) Retired Government Officials
5.	Membership Number	
5.1	Membership Type (drop down will change based the institute selected)	
5.1	Date of Enrolment / Membership	
5.2	Membership Valid upto	



6	Advocates registered with Bar (Name of Bar Council)	
6.1	Registration Number as given by Bar	
6.2	Date of Registration	
6.3	Valid up to	
7	Retired Government Officials	Retired from Centre/ State
7.1	Date of Retirement	
7.2	Designation of the post held at the time of retirement	Scanned copy of Pension Certificate issued by AG office or any other document evidencing retirement
8.	Applicant Details	
8.1	Full name as per PAN	
8.2	Father's Name	
8.3	Date of Birth	
8.4	Photo	
8.5	Gender	
8.6	Aadhaar	<optional></optional>
8.7	PAN	< Pre filled from Part A>
8.8	Mobile Number	<pre a="" filled="" from="" part=""></pre>
8.9	Landline Number	
8.10	Email id	< Pre filled from Part A>
9.	Professional Address	(Any three will be mandatory)
9.1	Building No./ Flat No./Door No.	
9.2	Floor No.	
9.3	Name of the Premises / Building	
9.4	Road / Street Lane	
9.5	Locality / Area / Village	
9.6	District	
9.7	State	
9.8	PIN Code	
10.	Qualification Details	



10.1	Qualifying Degree			
10.2	Affiliation University / Institute			
	Consent			
	I on behalf of the holder of Aadhaar number <pre-filled aadhaar="" based="" form="" in="" number="" on="" provided="" the=""> give consent to "Goods and Services Tax Network" to obtain my 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.</pre-filled>			
	Verification			
	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.			
	Place	< DSC /E-sign of the Applicant/EVC>		
	Date	< Name of the Applicant>		

Acknowledgment

Application Reference Number (ARN) -

You have filed the application successfully.

GSTIN, if available:

Legal Name:

Form No.:

Form Description:

Date of Filing:

Time of filing:

Center Jurisdiction:

State Jurisdiction:

Filed by:

Temporary reference number, (TRN) if any:

Place:

It is a system generated acknowledgement and does not require any signature.

Note - The status of the application can be viewed through "Track Application Status" at dash board on the GST Portal.



[See Rule ----]

Enrolment Certificate of Goods and Services Tax Practitioner

1.	Enrolment Number	
2.	PAN	
3.	Name of the Goods and Services Tax Practitioner	
4.	Address and Contact Information	
5.	Date of enrolment as GSTP	
Date Enrol	ment Authority	Signature of the
Desig	gnation.	Name and
		Centre / State



[See Rule ----]

Reference No.	Date
То	
Name	
Address of the Applicant	
GST practitioner enrolment No.	
Show Cause Notice for disqualification	
It has come to my notice that you are guilty of misconduct, the deta hereunder:	ails of which are given
1.	
2.	
You are hereby called upon to show cause as to why the certification you should not be rejected for reasons stated above. You are response within <15> days to the undersigned from the date of received.	requested to submit your
Appear before the undersigned on (date) (Time	ne)
If you fail to furnish a reply within the stipulated date or fail to app the appointed date and time, the case will be decided ex parte records and on merits	•
	Signature
	Name
	(Designation)



[See Rule -----]

Reference No.	Date-
То	
Name	
Address	
Enrollment Number	
Order of rejection of enrolment	as GST Practitioner
This has reference to your reply dated in response	to the notice to show cause dated
☐ Whereas no reply to notice to show cause has bee	n submitted; or
☐ Whereas on the day fixed for hearing you did not	appear; or
☐ Whereas the undersigned has examined your rep and is of the opinion that your enrolment is liable to be 1. 2.	-
The effective date of cancellation of your enrolment is	s < <dd mm="" yyyy="">>.</dd>
	Signature
	Name (Designation)



[See Rule -----]

Authorisation / withdrawal of authorisation for Goods and Services Tax Practitioner

To

The autl	norized officer	
Central	Tax/State Tax.	
	PART-A	
Sir/Mad	am	
	Name of the Proprietor/all Partners/Karta/Managing Directors and /Members of Managing Committee of Associations/Board of Trustee	
	solemnly authorize, withdraw authorization of	
for	- (Name of the Goods and Services Tax Practitioner), bearing Enrolmenthe purposes of Section 48 read with rule 24.Return to perform to son behalf of (Legal Name) bearing << GSTIN ->>:	
Sr. No.	List of Activities	Check box
1.	To furnish details of outward and inward supplies	
2.	To furnish monthly, quarterly, annual or final return	
3.	To make deposit for credit into the electronic cash ledger	
4.	To file an application for claim of refund	
5.	To file an application for amendment or cancellation of registration	
	The consent of the (Name of Goods and Services Tax Presentith*.	ractitioner) is
*Strike	out whichever is not applicable.	
	Signature of the authorize	zed signatory Name
Date	Desig	nation/Status
Place		



Part -B

Consent of the Goods and Services Tax Practitioner

solemnly acc	of the Goods and cord my consent to a), GSTIN	ct as the Good	ds and Services T	ax Practition	ner on beh	alf of
					Signature	
					Name	
Date				Enroli	ment No.	

