**Form GST –TRP -1**

**[See Rule ……]**

**Application for Enrolment as Tax Return Preparer under**

**Goods and Services Tax Act, <<20…>>**

| **S. No.** | **Particulars** | **M/O/D** |  |
| --- | --- | --- | --- |
| 1. | Type of Application | M | New Renewal |
| 2. | Enrolling Authority | M | CentreAuthority  StateAuthority |
| 3. | State | M |  |
| 4. | Jurisdiction | M |  |
| 5. | Period of Enrollment | M | From ……  To ……… |
| 6. | **Enrolmentsought as:** | M |  |
| 6.1 | CharteredAccountant holding COP |  |  |
| 6.2 | Company Secretary holding COP |  |  |
| 6.3 | Cost & Management Accountant holding COP |  |  |
| 6.4 | Lawyer currently licensed to practice |  |  |
| 6.5 | Retired employee of Centre / State Revenue Department |  |  |
| 6.6 | Others |  |  |
| 7. | **ApplicantDetails** |  |  |

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| 7.1 | Name |  |  |
| --- | --- | --- | --- |
| 7.2 | Date of Birth | M |  |
| 7.3 | Gender | M |  |
| 7.4 | Aadhar | O |  |
| 7.5 | PAN | M |  |
| 7.6 | MobileNumber | M |  |
| 7.7 | LandlineNumber | O |  |
| 7.8 | E Mail Id | M |  |
| 8. | **Professional Address** | **M** |  |
|  | Building No./ Flat No./ Door No. |  |  |
|  | Floor No. |  |  |
|  | Name of the Premises/ Building |  |  |
|  | Road/ Street Lane |  |  |
|  | Locality / Area /Village |  |  |
|  | District |  |  |
|  | State |  |  |
|  | PIN Code |  |  |
| 9. | **QualificationDetails** | **M** |  |
|  | QualifyingDegree |  |  |
|  | AffiliationUniversity/Institute |  |  |

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|  | | Membership/EnrollmentNumber |  |  | |
| --- | --- | --- | --- | --- | --- |
|  | | Date of Enrollment/ Membership |  |  | |
|  | | Membership Valid up to |  |  | |
|  | 10**. Verification and Declaration**  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 there form..  **Signature of Authorized Signatory** (Tax Return Preparer) E-Sign/ DSC  Full Name (first name, middle, last name)  Place  Date | | | |  |
|  |  |

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| **Government of…….**  **Department of ……** |
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**Form GST –TRP 1 A**

| **[See Rule ……]**  **Acknowledgement Receipt** |
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| **Application ReferenceNumber(ARN)**  Your application has been successfully filed against <Acknowledgement ReferenceNumber>  The status of the Application can be viewed through “Track Application Status” at dash board on the GST Portal.  **Form No. :**  **FormDescription:**  **Date of Filing :**  **Time of filing : Name**  **of the Applicant : Center**  **Jurisdiction : State**  **Jurisdiction:**  **Filed by : (Name of the Applicant TRP)** |
| --- |

| **Itis a system generated acknowledgement and does not require any signature.** |
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