

CHHATTISGARH PROFESSIONAL TAX FORM

FORM-1

[See rule 3(1)]

Application for registration (for employers)

To,
The Profession Tax Assessing Authority
.....

I, hereby apply for a certificate of registration under the Chhattisgarh Vritti Kar Adhiniyam, 1995 as per particulars given below:-

- 1. Name of the applicant,
- 2. Address of the principal place of work
(building/street/ road/municipal ward/ town/ city /tehsil/district)
- 3. Status of the person signing the form (Whether proprietor / partner
/principal/officer/ agent /manager / director/ secretary)
- 4. Name of the employer
- 5. Class of the employer (whether individual/firm/ company
/corporation/ society /club I association).
- 6. If registered under the Chhattisgarh Vanijyik Kar Adhiniyam, 1994/
Central Sales Tax Act. 1956, the number of registration certificate,-

(a) Under Vanijyik Kar Adhiniyam
- (b) Under Central Sales Tax

7. Names and addresses of other places of work in Chhattisgarh.
The above statements are true to the best of my knowledge and belief.

Place Signature
Date Status

*Strike out whichever is not applicable

ACKNOWLEDGEMENT

(Particulars of name and address to be filled in by the applicant)

Received an application for registration in form 1:-
Name of the applicant
Full postal address
Place
Date..... Signature of the receiving officer