

<b>1</b>	Sheet No. <input type="text"/> of <input type="text"/>	Token No. <b>N°</b> <input style="background-color: #ADD8E6;" type="text"/>	
<b>Registry</b>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 5px;"> <b>De-Register From</b>  <input type="checkbox"/> Income Tax    <input type="checkbox"/> Sales Tax    <input type="checkbox"/> Federal Excise         </div> <div>           NTN <input style="width: 100px;" type="text"/> - <input style="width: 20px;" type="text"/> STRN <input style="width: 150px;" type="text"/> </div> </div>		
	Category <input type="checkbox"/> Company <input type="checkbox"/> Individual <input type="checkbox"/> AOP <div style="display: flex; justify-content: space-between;"> <div> <b>Company Type</b>  <input type="checkbox"/> Pvt. Ltd.    <input type="checkbox"/> Public Ltd.    <input type="checkbox"/> Small Company  <input type="checkbox"/> NGO    <input type="checkbox"/> Society    <input type="checkbox"/> Any other (pl specify) _____         </div> <div> <input type="checkbox"/> Trust    <input type="checkbox"/> Unit Trust    <input type="checkbox"/> Modarba  <input type="checkbox"/> HUF    <input type="checkbox"/> Firm    <input type="checkbox"/> Artificial Juridical Person    <input type="checkbox"/> Body of persons formed under a foreign law         </div> </div>		
	Status <input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident    Country of Non Resident _____		
	CNIC/PP No. _____ [for Individual only, Non-Residents to write Passport No.]    Gender <input type="checkbox"/> Male <input type="checkbox"/> Female		
	Reg./ Inc. No. _____ [for Company & Registered AOP only]    Birth/ Inc. Date _____		
	Name _____ <i>Name of Registered Person (Company, Individual or AOP Name)</i>		
	Address _____ <i>Registered Office Address for Company and Mailing/Business Address for Individual &amp; AOP, for all correspondence</i>		
	<div style="display: flex; justify-content: space-between;"> <div>Office/Shop/House /Flat /Plot No</div> <div>Street/ Lane/ Plaza/ Floor/ Village</div> <div>Block/ Mohalla/ Sector/ Road/ Post Office/ etc</div> </div>		
	<div style="display: flex; justify-content: space-between;"> <div>Province</div> <div>District</div> <div>City/Tehsil</div> <div>Area/Town</div> <div>Activity Code <input style="background-color: #ADD8E6;" type="text"/></div> </div>		
	Principal Activity _____		
<b>Representative/ Authorized Rep.</b>	Rep. Type <input type="checkbox"/> Representative u/s 172 <input type="checkbox"/> Authorized Rep. u/s 223    In Capacity as _____		
	CNIC/ NTN _____    Name _____		
	Address _____ <div style="display: flex; justify-content: space-between;"> <div>Office/Shop/House /Flat /Plot No</div> <div>Street/ Lane/ Plaza/ Floor/ Village</div> <div>Block/ Mohalla/ Sector/ Road/ Post Office/ etc</div> </div>		
	<div style="display: flex; justify-content: space-between;"> <div>Province</div> <div>District</div> <div>City/Tehsil</div> <div>Area/Town</div> </div>		
	Phone _____    Mobile _____    Fax _____ <div style="display: flex; justify-content: space-between;"> <div>Area Code    Number</div> <div>Area Code    Number</div> <div>Area Code    Number</div> </div>		
E-Mail _____    (e-Mail address for all correspondence)			
<b>Reasons for De-Registration</b>	<input type="checkbox"/> Ceased to carry on business		
	<input type="checkbox"/> Supplies have become exempt (Give details) _____		
	<input type="checkbox"/> Taxable turnover during the last 12 months has remained below the threshold (a) Please give the value of taxable supplies you made in last 12 month    Rs. <input style="width: 100px;" type="text"/> (b) Please give reason(s) for reduction in your taxable turnover (attach sheet, if necessary). _____		
	<input type="checkbox"/> Transfer or sale of business (Attach proof) <input type="checkbox"/> Merger with another person (Attach proof)		
	<input type="checkbox"/> Other (Please Describe) _____		
<b>Declaration</b>	I, the undersigned solemnly declare that to the best of my knowledge and belief the information given above is correct and complete. It is further declared that any notice sent on the e-mail address or the address given in the registry portion will be accepted as legal notice served under the law.		
	<div style="display: flex; justify-content: space-between;"> <div>Date</div> <div>CNIC/ Passport No.</div> <div>Name of Applicant</div> <div>SIGNATURES</div> </div>		
<b>Official Area</b>	<input type="checkbox"/> Above Taxpayer's Registration is allowed for De-Registration with effect from Date <input style="width: 100px;" type="text"/> with permission of this office. Request is being forwarded for necessary action at Registration Office.		
	<input type="checkbox"/> Request regretted. Letter issued vide no. <input style="width: 100px;" type="text"/> Dated <input style="width: 100px;" type="text"/>		
	Name of RTO/LTU _____ <div style="text-align: right;">Signature &amp; Seal of Taxation Officer</div>		
<b>Reg. Office</b>	<input type="checkbox"/> De-Registration is done and verified in Registration System on <input style="width: 100px;" type="text"/>		
	<div style="text-align: right;">Signature &amp; Seal of Registration Officer</div>		