

বৃহ্ন স্ট্রমান্ত্রবাদশা Department of Revenue and Customs Ministry of Finance Royal Government of Bhutan

GST Registration Form – Resident (Non-Individual)

	Appli	ication Date:	DD/MM/YYYYYY
Check Registration Select the registration	n Eligibility on details of the applicant y	ou are registo	ering.
Registration detail Select the taxpayer	s of applicant type of the applicant:	Nor	n Individual entity
Select the organiza	tion type of the applicant:	Foreign Inc.Part Other	Company SOE Company Doint Venture nership Partnership
Nu.5 million (for on Nu.2.5 million (for on Note: If you answer	s have an annaul turonver of ompulsory registration) voluntary registration) ared "Yes", please attach d cial statement, tax returns	f: [] ocumentary	Yes No Yes No evidence to verify your
Enter Identificatio	's ID number below: n Numbers tion/Incorporation Number	:	
*Business Licence:			
Other: Taxpayer Details Please enter the tax Regional Details RRCO:	xpayer details from the appl	ication into th	ne form below:
Organizational Det *Organization Nam	tails: (Select one as the pri	imary name	for correspondence) Primary Name?
Trade Name			·······:
Trade 1:			Primary Name?
Trade 2:			Primary Name?
Trade 3:			Primary Name?

Details *Organization Comme	encement date:	DD/MM/Y	YYYYY	
*Primary Industry:				
Secondary Industry:				
Contact Details Please enter the taxpa Business Address: (S				
*Address:				
*Gewog:				
*Dungkhag:				
*Dzongkhag:				
Primary address fo	r correspondence			
Other Country *Country:				
*Address:				
*Town/City:				
*Region/Postcode:				
Primary address fo	r correspondence			
Phone Types: (Select		ry phone num	ber for corres	spondence)
*Mobile Phone: Cou	intry Code	#		
Primary phone? Business Phone: Co	untry code	#		
Primary phone?				

Email Types: (Select or	ne as the p	orimary e	mail for correspond	lence)	
*Primary Email				Pri	imary Email?
Secondary Email				Pri	mary Email?
Additional Details Please enter the taxpaye Bank Account	er's additic	onal detial	s from the applicatio	on into the fo	rm below:
Bank:					
Branch:					
Name of Account Holde	r:				
Account Number:					
Account Type: Select Tax Types Select the tax types for r Tax Types::	egistratior Excise Ta: Goods an	x	o Toy		
Tax Details Please enter the specific type.				e form below	for each tax
GST				ET	
Activation Registration	Details		Effective date of reg	gistration:	
Effective date of registra			DD/MM/YYY	YYY	
DD/MM/YYYYYY					
*Return Frequency:		onthly arterly	*Return Frequency *Types of Excisable Aerated water Alcohol	e Goods:	Monthly
Registration Questions	Ex ₁				adata/Gapari
Additional documents	* Co Deta	py of the o	nce Bank Detail certificate of incorpo majority shareholde partners (if any)	ration	

and correct to the best of minformation, or documents are	e information provided in this docu ny/our knowledge and belief. In found to be untrue or fraudulent ses, or prosecution under applicat	case the declaration, , I/we shall be liable for
Name of Person:		
Designation/Position:		
Signature:		
Date:	DD/MM/YYYYYY	