



Government of Balochistan
Balochistan Revenue Authority
Sign-Up Form for BRA Withholding Agent
Balochistan Sales Tax Special Procedure (Withholding) Rules, 2018

bstw-01
Section-14
Rule-3(2)

Registry	1 Sheet No. <input type="text"/> Of <input type="text"/> Token No. <input type="text"/>		
	2 Apply for <input type="checkbox"/> BRA Withholding Agent not holding any BNTN <input type="checkbox"/> Change in particulars <input type="checkbox"/> BNTN 3 Authorization: <input type="checkbox"/> Balochistan Revenue Authority is authorized to obtain my registration / enrolment particulars from FBR and other Provincial Revenue Authorities. This option is applicable only to taxpayers already registered with FBR and authorizing BRA Portal to transfer the registration / enrolment particulars from FBR Portal. 4 Taxpayer Type: <input type="checkbox"/> Individual <input type="checkbox"/> AOP <input type="checkbox"/> Company 5 Status: <input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident (Name of country _____) 6 Name: _____ Name of registered person (Individual, AOP or Company) 7 CNIC No. <input type="text"/> - <input type="text"/> - <input type="text"/> For resident individual, Date of Birth. _____ Non-resident to write Passport (PP) No. _____ 8 Address: Registered Office Address for Company and Mailing / Business Address for Individual and AOP, for all correspondence. Office / Shop / House / Flat / Plot No. _____ Street / Lane / Plaza / Floor / Village _____ Block / Mohalla / Sector / Road / Post Office etc. Province _____ District _____ City / Tehsil (With Zip Code) _____ Area / Town _____ 9 Principal Service: _____ Service Code: <input type="text"/>		
Agent Particulars u/s 73	10 Representative Type: <input type="checkbox"/> Self <input type="checkbox"/> Authorized Person U/s 73 in capacity as _____ 11 CNIC / NTN: _____ Name: _____ 12 Address: _____ Office / Shop / House / Flat / Plot No. _____ Street / Lane / Plaza / Floor / Village _____ Block / Mohallah / Sector / Road / Post Office etc. Province _____ District _____ City / Tehsil (with Zip Code) _____ Area / Town _____ 13 Phone: _____ Mobile: _____ Fax: _____ Area Code _____ Number _____ Area Code _____ Number _____ Area Code _____ Number _____ 14 E-Mail: _____ (e-mail address for all correspondence)		
Bank Accounts	15 Total No. of Bank Accounts: _____ provide details of all bank accounts, use additional copies of this form, if needed. 16 Account Sr. _____ Action Required: <input type="checkbox"/> Add <input type="checkbox"/> Change <input type="checkbox"/> Close 17 A/C No. _____ A/C Title: _____ Type: _____ 18 Bank Name: _____ City: _____ Branch: _____ (NBP, MCB, HBL, UBL, City etc.) 19 Account Opening Date: _____ Account Close Date, if close action is requested: _____		

Declaration	20	<p>I, the undersigned in capacity as _____, do hereby solemnly declare that to the best of my knowledge and belief, the information given above is correct and complete in all respects. It is further declared that any letter or information or notice sent on the E-email / E-portal / Address given in the registry portion, will be accepted as legal notice served under the law. I also hereby authorize the Balochistan Revenue Authority to obtain my/our registration data from the Federal Board of Revenue and other Provincial Tax Authorities.</p> <div style="display: flex; justify-content: space-around; margin-top: 20px;"> Date _____ CNIC / Passport No. _____ Name of Applicant _____ Signature _____ Official Stamp/Seal _____ </div>			
Official Area	21	<p>NTN already allotted by FBR: _____ User ID allotted by BRA: _____</p> <p>Date: _____ Tax Office: _____ Signature of Issuing Officer: _____</p>			