

		<b>Government of Balochistan</b> <b>Balochistan Revenue Authority</b> <b>De-Signing Form for BRA Withholding Agent</b> <b>Balochistan Sales Tax Special Procedure (Withholding) Rules, 2018</b>		<b>BSTW-02</b> <b>Section-14</b> <b>Rule-3(12)</b>	
<b>Registry</b>	1	Sheet No. <input type="text"/> Of <input type="text"/>	Token No. <input type="text"/>		
		BNTN / NTN / FTN: <b>B</b> <input type="text"/>			
	2	Taxpayer Type: <input type="checkbox"/> Individual <input type="checkbox"/> AOP <input type="checkbox"/> Company			
	3	Status: <input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident (Name of country _____)			
	4	CNIC No. <input type="text"/> - <input type="text"/>			For resident individual. Date of Birth. _____ Non-resident to write Passport (PP) No. _____
	5	Reg. / Incorporation No. _____ for company and registered AOP only.			
	6	Date of incorporation: _____			
	7	Name: _____ Name of Registered Person(Individual, AOP or Company)		Trade Name: _____	
<b>Reasons for De-Signing</b>	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 _____  (e-mail address) _____ Telephone Number: _____			
	9	<input type="checkbox"/> Ceased to carry on business.			
	10	<input type="checkbox"/> Service has become exempt or non-taxable in Balochistan (Give detail).			
	11	<input type="checkbox"/> Merger with another person or business (Attach evidence).			
12	<input type="checkbox"/> Transfer or sale of business (Attach evidence) with NTN of the transferee or the buyer.				
13	<input type="checkbox"/> Other (Please describe).				
<b>Declaration</b>	14	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 E-mail / E-portal / Address given in the registry portion, will be accepted as legal notice served under the law. I request for de-registration of my/our name.			
		Date _____	CNIC/Passport No. _____	Name of Applicant _____	Signature _____