



Government of the People's Republic of Bangladesh
National Board of Revenue
Application for Value Added Tax Registration and Turnover Tax Enlistment
 [See the Rule 04]

Notes: * Mandatory field Automatically loaded field Editable field Disabled field

For more information, move the cursor over this symbol

You may click on **Validate** button to perform the validation for the input data before submitting the form.

1. Taxpayer Identification Number (TIN)

2. Name of the individual or business entity to be registered

3. Registered office address

Address Type *	District/ Zilla *				
City Format	Road No./Name *	Block	Holding No. *		
Village Format	Village *		Upazilla *		
Postal Code *	Name of Mouza				
Phone No. +88	Fax No. +88	Cell No. * +88			
Email *	Website				

4. Address of the branches

SL	Address with Mouza Name		Cell No./ Phone No./ Email	
1	Address		Cell No.	+88
			Phone No.	+88
	Mouza		Email	
2	Address		Cell No.	+88
			Phone No.	+88
	Mouza		Email	
3	Address		Cell No.	+88
			Phone No.	+88
	Mouza		Email	
4	Address		Cell No.	+88
			Phone No.	+88
	Mouza		Email	
5	Address		Cell No.	+88
			Phone No.	+88
	Mouza		Email	

SL	Address with Mouza Name		Cell No./ Phone No./ Email	
6	Address		Cell No.	+88
			Phone No.	+88
	Mouza		Email	
7	Address		Cell No.	+88
			Phone No.	+88
	Mouza		Email	
8	Address		Cell No.	+88
			Phone No.	+88
	Mouza		Email	
9	Address		Cell No.	+88
			Phone No.	+88
	Mouza		Email	
10	Address		Cell No.	+88
			Phone No.	+88
	Mouza		Email	

[Please use Subform 01 - Branches if you have more branches]

5. Bank Account Nos.

SL	Account Name *	Account No(s) *	Name of the Bank *	Branch *
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

[Please use Subform 02 - Bank accounts to give information of your bank accounts]

6. What is your annual turnover?

Taka *

In word



7. Registration type *

8. Are you required to withhold VAT from supplies made to you by other VAT registered taxpayers?

Yes

No

If Yes, Please choose appropriate item.

Government Entity

NGO

Public Limited Company

Post-secondary educational institution

Registered persons operating under LTU-VAT

Bank, Insurance or other Financial Institution

9. Legal format/type of organization or taxable person *

If "Other", please specify



10. Are you also required to pay the following taxes?

Supplementary Duty

Excise Duty

Surcharge



11. Effective date of Registration/Enlistment *



12. Application Category *

13. Application Type:

New Registration

Re-registration

Write your old 10 or 11-digit Business Identification Number (BIN), in case of re-registration

SL	Old BIN(s)
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	

SL	Old BIN(s)
11	
12	
13	
14	
15	
16	
17	
18	
19	
20	



[Please use subform 03 - Old BINs if you have more old BINs]

14. Directors/Partners/Proprietor's information

SL	TIN*	Name	Share (%)	Other Information *	
1				Identity Information *	
				NID	
				Passport No.	
				Issuing Country	
				Designation	
2				Identity Information *	
				NID	
				Passport No.	
				Issuing Country	
				Designation	
3				Identity Information *	
				NID	
				Passport No.	
				Issuing Country	
				Designation	
4				Identity Information *	
				NID	
				Passport No.	
				Issuing Country	
				Designation	
5				Identity Information *	
				NID	
				Passport No.	
				Issuing Country	
				Designation	



SL	TIN *	Name	Share (%)	Other Information *	
6				Identity Information *	
				NID	
				Passport No.	
				Issuing Country	
				Designation	
7				Identity Information *	
				NID	
				Passport No.	
				Issuing Country	
				Designation	
8				Identity Information *	
				NID	
				Passport No.	
				Issuing Country	
				Designation	
9				Identity Information *	
				NID	
				Passport No.	
				Issuing Country	
				Designation	
10				Identity Information *	
				NID	
				Passport No.	
				Issuing Country	
				Designation	

[Please use Subform 04 - Directors/Partners/Proprietor's information if you have more information]



15. Type of business activity *

- Importer Exporter Service Renderer Farming/Fishing
- Supplier (Manufacturer) Supplier (Trader) Mining Other (please specify below)

If "Other", please specify

16. Type of economic activity *

(a) Select () the appropriate economic activity [where applicable] *

- Retail Wholesale Manufacturing
- Building & Construction Seasonal Business Service Renderer
- Mining Farming/Fishing Other (please specify below)

If "Other", please specify

(b) Describe the business conducted in as much detail as possible. *

Give a precise description such as 'telecommunication service provider', 'ms product manufacturer', 'stock broker', etc.

Do not use general terms such as 'shopkeeper', 'manufacturer', 'service renderer', 'consultant', etc.

17. Declaration *

Please provide the information of the one who is applying for registration/enlistment.

The individual signing this form is the

If "Other", please specify

First name

Last name

TIN of signing person

National Identification Number (NID)

NID

Passport Information

Passport Number

Issuing Country

Date of Issue

Date of Expiration



I declare that the particulars provided in this application are complete, correct and true in every respect.*

After submitting, please check your mailbox for an email from "VAT Online Services" within 15 minutes for further instructions.