"Government of the People's Republic of Bangladesh

National Board of Revenue

### VAT/Turnover Tax Registration Form

Mushak-2.1

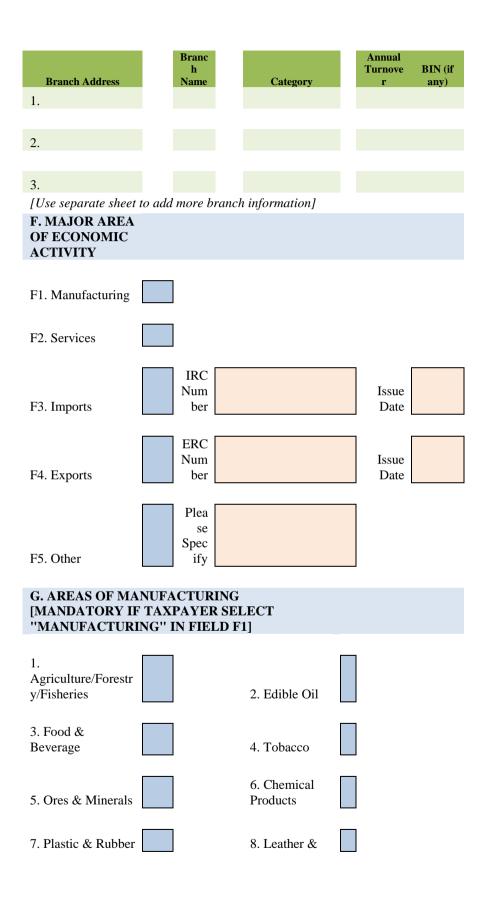
This form will be used for the taxpayers required/willing to get registered/enlistment under the Value Added Tax and Supplementary Duty Act, 2012. Please read the instructions pages at the end of this form carefully and fill ALL applicable fields correctly. Please contact our help- desk at 16555 if you need any assistance.							
<b>A. REGISTRATIO</b> A1. Registration Category	ON BASICS						
New		Re-registration					
		Old 11 Digit BIN					
		Name of Company					
B. BUSINESS INFORMATIC	DN						
B1. Type of ownership:							
(a) Proprietorship:		(b) Partnership:					
(c) Private Limited		(d) Public Limited					
(e) International Organization		(f) Diplomatic Mission					
(g) Government		(h) NGO					
(i) Educational Inst.		(j) Other	[Please specify in the field below]				

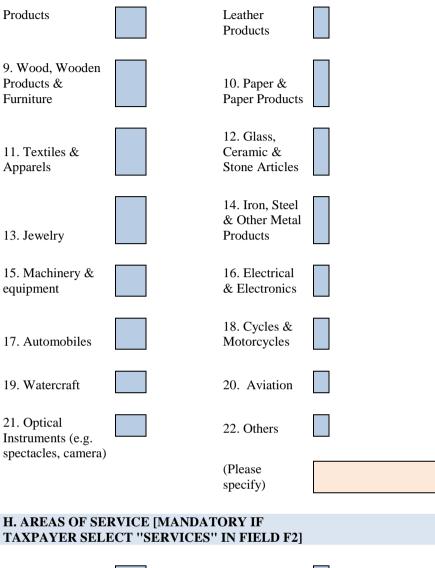


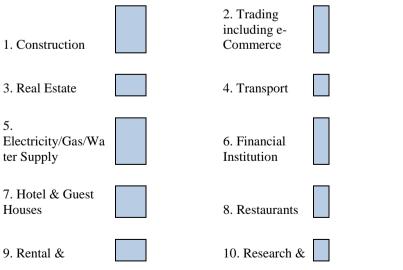
Withholding Entity: Yes		No	
C. General Information			
C1. Trade License No (if applicable)			Issue Date
C2. RJSC Incorporation number ( <i>if any</i> )			Issue Date
C3. e-TIN ( <i>if applicable</i> )			
C4. Name of the Company (As in e-TIN)			
C5. Name of the Company (If different than in e-TIN)			(Where applicable)
C6. Trading Brand Name ( <i>if any</i> )			
C7. Registration Type VAT C8. Equity		Turnover Tax	1
Information 100% Local	100 % Fore ign	Joint Venture Local Share (%)	
C9. BIDA Registration Number ( <i>if any</i> )			Issue Date
D. CONTACT INFORMATION			

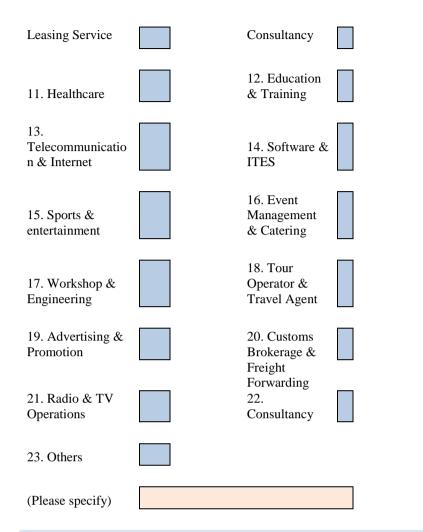
D1. Factory/Business Operations Address	
D2. District	
D3. Police Station	
D4. Post Code	
D5. Land Telephone Number (if any)	
D6. Mobile Telephone Number	(District code+phone number) (e.g. 01XXXX XXXXX)
D7. e-Mail	
D8. Fax Number ( if any)	(District code+phone
D9. Web address (if any)	number)
D10. Registered HQ Address [If different than address of D1] (if any)	
D11. Registered HQ Address outside Bangladesh [for 100% foreign ownership] (if any)	

E. LIST OF BRANCH UNITS YOU WISH TO BRING UNDER CENTRAL REGISTRATION









#### I. BUSINESS CLASSIFICATION CODE [MANDATORY IF TAXPAYER SELECT "MANUFACTURING" IN FIELD F1 AND/OR "SERVICES" IN FIELD F2]

Commercial Description of Supply	H.S/Servi ce Code	Description of H.S/Service Code	[USE SEPARATE CODE FOR EACH SUPPLY
1.			ACCORDING TO YOUR SELECTION
2.			IN SECTION "G' AND/OR "H"
3.			ABOVE]
[Use separate sheet to add more information]			

### J. BANK ACCOUNT DETAILS



1.	
2.	
3.	

[Add separate sheet for more bank accounts]

K. INFORMATION	N ABOUT OWNE	ERS/DIRECTORS/I	Head of Entity
Full Name	Share (%)	NID/Passport Number & Issuing Country	e-TIN
1.			
2.			
3.			

[Add separate sheet for more owners/directors. For foreign nationals use Passport Number and issuing country]

# L. BUSINESS OPERATIONS

Description	Quantity	H.S. Code		Value in BDT	Producti on Capacity	Physica l Conditi on
L6. Major C Machinery ( APPLICAB	IF					
L5. Are you VAT exemp	0,	Yes		No		
L4. Are you zero rated su		Yes		No		
L3. No of er	nployees					
L2. Projecte next 12 mon		l	BD	Г		
L1. Taxable months perio		-	BD	Г		

1						
2.						
3.						
[Add separat for more info						
for more mic	ormationj					
L7. Input-Ou (IF APPLICA						
			Se			Quantit y of
Commercial D	escription of	H.S./ Service	lli	Description of	H.S./ Service	input
Outp		Code of Output	ng U	Major Inputs	Code of Input	used per unit
		Output	nit		Input	of output
1.						
2.						
3.						
[Add separat for more info						
	-	informat	ion f	or Online Activity		
IVI. Autionz	eu i ei sons	mormai	1011 10	of Online Activity		
		Pers				
Descript	ion	on-1		Person-2	Pers	on-3
1. Name						
2 D						
2. Designatio	on					
3. NID						
3. NID						
4 Mabila Na						
4. Mobile No						
5. E-mail						
J. L. man						
6. Purpose						
5. 1 urpose						
N. Declarati	on					

All the details and information provided in this form are true and complete. I am aware that any untrue/incomplete statement may result in delay in BIN issuance and I may be subjected to full penalty under The Value Added Tax and Supplementary Duty Act, 2012 or any other applicable Act prevailing at present.

# SIGNATURE OF AUTHORIZED PERSON

(For manual submission only)

**FULL NAME:** 

**DESIGNATION:** 

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