

FORM GST PCT -04

[See rule 83(4)]

Reference No.

Date-

To

Name

Address

Enrollment Number

Order of rejection of enrolment as GST Practitioner

This has reference to your reply dated ---- in response to the notice to show cause dated -----.

- Whereas no reply to notice to show cause has been submitted; or
- Whereas on the day fixed for hearing you did not appear; or
- Whereas the undersigned has examined your reply and submissions made at the time of hearing, and is of the opinion that your enrolment is liable to be cancelled for following reason(s).

1.

2.

The effective date of cancellation of your enrolment is <<DD/MM/YYYY >>.

Signature Name

(Designation)