

(TO BE PUBLISHED IN PART IV OF THE DELHI GAZETTE EXTRAORDINARY)

**GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI  
DEPARTMENT OF TRADE AND TAXES  
VYAPAR BHAWAN, I.P. ESTATE, NEW DELHI-110 002**

No.F. 3(352)/Policy/VAT/2013/231-241

Date : 28.05.2013

**NOTIFICATION**

Whereas, it is mandatory for all registered dealers to inform the Commissioner about any amendment in respect of their business activities, as detailed out in section 21 of the Delhi Value Added Tax Act, 2004 (hereinafter called the "Act"); and

Whereas it is also mandatory for all registered dealers to declare the name of manager of business, permanent account number and Importer Exporter Code (IEC) under section 95 of the Act;

Therefore I, Prashant Goyal, Commissioner, Value Added Tax, Government of National Capital Territory of Delhi, without prejudice to legal provisions under DVAT Act, 2004 and DVAT Rules, 2005, consider it necessary that the updated dealer profile of all the registered dealers should be available with the Department.

Now, therefore, in exercise of the powers conferred on me by sub-section (1) read with sub section (2) and (3) of section 70 and sub section (2) of section 59 of the Act, I direct that all the dealers registered under the Act, as on 31-03-2013, shall furnish the information online on or before 30.06.2013, using their login ID and password. For this purpose, Form DP-1 annexed with this Notification shall be used.

This Notification shall come into force with immediate effect.

**(Prashant Goyal)  
Commissioner, Value Added Tax**

No.F. 3(352)/Policy/VAT/2013/231-241

Date : 28.05.2013

Copy forwarded for information and necessary action to:-

1. Principal Secretary (Finance), Finance Department, Government of NCT of Delhi, Delhi Sachivalaya, New Delhi.
2. Principal Secretary (GAD), Government of NCT of Delhi, Delhi Sachivalaya, New Delhi with one spare copy for publication in Delhi Gazette Part-IV (extraordinary) in today's date.
3. Principal Secretary to the Chief Minister, Government of NCT of Delhi, Delhi Sachivalaya, New Delhi.
4. All Special / Addl. / Joint Commissioners, Department of Trade and Taxes, Vyapar Bhawan, I.P. Estate, New Delhi.
5. Addl. Commissioner (PR), Department of Trade and Taxes, Vyapar Bhawan, I.P. Estate, New Delhi to arrange to give wide publicity to this notification.
6. Programmer (EDP), Department of Trade and Taxes, Vyapar Bhawan, I.P. Estate, New Delhi to upload the notification on the web site of the Department.
7. Deputy Director (Policy), Department of Trade and Taxes, Vyapar Bhawan, I.P. Estate, New Delhi.
8. All VATOs / AVATOs, Department of Trade and Taxes, Vyapar Bhawan, I.P. Estate, New Delhi through their Zonal Incharge.
9. Registrar, VAT Appellate Tribunal Department of Trade and Taxes, Vyapar Bhawan, I.P. Estate, New Delhi.
10. President/Secretary, Sales Tax Bar Association (Regd.), Vyapar Bhawan, I.P. Estate, New Delhi.
11. Guard File.

**(T.C. Sharma)  
Value Added Tax Officer (Policy)**

Department of Trade & Taxes  
Government of NCT of Delhi  
Form – DP-1  
Dealer Profile

1. A. TIN
- B. Full Name of Dealer (Business Name)
- C. Ward No
- D. Date of Current Registration (DD/MM/YYYY)
2. Nature of Business:
3. Constitution of the Business
4. A. Whether opted for Composition Scheme under Section 16 of the Act
- B. Rate of Tax under Composition Scheme:
5. Annual Turnover Category
- A. Type of registration – mandatory/ voluntary?
- B. Turnover in preceding year
- C. Whether dealt in only intrastate sales/ purchases transactions during
- (i) 2010-11
- (ii) 2011-12
- (iii) 2012-13
- D. Expected turnover in 2013-14
- E. Would you deal in interstate transactions or imports/ exports in 2013-14?
6. A. PAN :
- B. If the name on PAN card is different from 1B,
- (i) then Name appearing on PAN Card:
- (ii) PAN
- C. If the dealer is a proprietorship concern
- (i) the name of the proprietor
- (ii) Proprietor's PAN

7. Registration No., if registered

Sl. No.	Department	Registration Number
1.	Central Excise	<input type="text"/>
2.	Service Tax	<input type="text"/>
3.	IEC	<input type="text"/>

8. Address of Principal Place of Business (to be used for service of physical notice, if any)

Address:

Email Id

Mobile Number

Fax Number

Area in Sq. Mts(open)

Area in Sq. Mts(Covered)

9. List of additional places of business within Delhi and outside Delhi:

Sl No.	Addresses	Date of Establishment	Ward Number as per address in case of branch in Delhi	TIN in case of branch outside Delhi	Nature of use viz. Shop/ Godown/Accounts Office etc	Approx. area in square feet		Floor viz. Basement Ground/1/1 etc ((-1/0/1/2....))	Whether any other firm functioning from same address Y/N	If Yes, TIN and Ward of all such businesses
						Open	Covered			

10. List of all Bank Accounts

Sl No.	Account No.	Bank	Branch	IFSC Code
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11. Address of third party Storage Facility being used in Delhi or outside (for Delhi Stocks), if any:

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12. Exhaustive list of Commodities sold/ purchased in last year

Sl No.	Name of Commodity with Commodity Code	Rate of Tax under DVAT	% of GTO in preceding year	Net tax contribution in last FY
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13. Security /Surety, if any, valid with DTT

Type of Security	Security Description	Amount	Date of expiry of Security, if in the shape of Bank Guarantee
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14. List of Managers

Sl No.	Name	Date of Birth	Father's Name	Address	Aadhaar	PAN
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15. Particulars of person (proprietor/karta/partners/directors in the business/members of executive committee of societies, clubs etc.) having interest in business and Authorised signatories.

Sl No.	Name	Gender	Date of Birth	Father's/ husband's name	Residential/Permanent Address	Passport No.	Aadhaar No.	PAN	Whether Authorised Signatory Yes/No	Name, Address and TIN of other business where interest held, if any	Status in that other businesses
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16. Counsel Details

Counsel Name	First Name	Middle Name	Surname
Counsel Mobile Number			
Counsel Email Id			
Advocate/ CA/ STP			

17. Verification

I/We \_\_\_\_\_ hereby solemnly affirm and declare that the information given hereinabove is true and correct to the best of my/our knowledge and belief and nothing has been concealed therefrom.

Signature of Authorised Signatory \_\_\_\_\_

Full Name (first name, middle, surname) \_\_\_\_\_

Designation/Status \_\_\_\_\_

Place \_\_\_\_\_

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Day Month Year