

Government of India /<<State>>

Department of -----

Form GST REG-18

[See Rule ----]

Reference No << Reference Number >>

<< Date– DD/MM/YYYY>>

To

GSTIN/Unique ID

(Name of Taxpayer)

(Address)

Application Reference No. (ARN)

Dated – DD/MM/YYYY

Order for Approval of Application for Revocation of Cancelled Registration

This is with reference to your Application for Revocation of Cancelled Registration referred above filed under the Goods and Services Tax Act, 20--. The Department has examined your application and the same has been found satisfactory and your registration is hereby restored.

As per section ---, revocation of cancellation of registration under CGST Act / SGST Act is also deemed to be revocation of cancellation of registration under the SGST Act / CGST Act.

Digital Signature

Name of Proper

officer (Designation)

Jurisdiction – Centre/ State

Date

Place
