## Government of India /<<State>>

## Department of -----

## Form GST REG-19

[See Rule-----]

## Notice for Seeking Clarification / Documents relating to Application for << Revocation of Cancellation>>

Reference Number :	<< Date- DD/MM/YYYY>>
То	
Name of the Applicant/ Taxpayer	
Address of the Applicant/Taxpayer	
GSTIN*	
Application Reference No. (ARN):	Dated DD/MM/YYYY
This is with reference to your < <registration>&gt; application referred above, file Services Tax Act, 20 The Department has examined your application and is following reasons:</registration>	
1.	
2.	
3.	
<b></b>	
¢ You are directed to submit your reply by (DD/MM/YYYY)	
$\ensuremath{\mathfrak{C}}$ *You are hereby directed to appear before the undersigned authority on (HH:MM)	(DD/MM/YYYY) at
If no response is received by the stipulated date and time as stated aboliable for rejection. Please note that no further notice / reminder will be issued	
	Digital Signature

Name of the Proper Officer

Designation