

Department of -----
Government of -----
(State with which the applicant wants to enroll)

Form GST TRP - 4

[See Rule ----]

Reference No << Reference Number >>

<< Date >>

To
(Name of the Taxable person) (As mentioned in the registration application)
(Address of the Taxable person) (As mentioned in the registration application)
Enrollment Number

Application Reference No. (ARN) (Latest)

Dated – DD/MM/YYYY

**Order of Rejection of Application for enrolment as Tax Return Preparer/
Or
Disqualification to function as Tax Return Preparer**

This is with reference to your enrolment application referred above, filed under the ---- Goods and Services Tax Act, 2016. The Department has examined your application and the same has not been found satisfactory for the following reasons:-

1
2
3
....

If you are not satisfied with the order, you can file an appeal in accordance with the provisions of the Act.

[Signature (digital)]

Name
(Designation)