



CENTRAL BOARD OF EXCISE AND CUSTOMS

Ministry of Finance - Department of Revenue



FORM ST-1

[Application form for registration under Section 69 of The Finance Act, 1994(32 of 1994)]

Application Date:

IDENTIFICATION OF BUSINESS REQUIRING REGISTRATION

Name of Applicant : MANU P.V., DISCOVER KERALA HOLIDAYS

Address of the Applicant : PALAKKALAZHIKOM, CHERUKADAVU, SHALIACKARA, PUNALUR
HO, QUILON, KERALA, 691305

Details of Permanent Account Number(PAN) of the applicant

PAN Status : Allotted

PAN : AFTPV5145H

Name of the Applicant(as appearing in PAN) : MANU PALAKKALAZHIKAM VIJAYADHARAN

Constitution Of applicant : Proprietorship

Name of Trustee/Proprietor/HUF : MANU.P.V

Category of Registrant : Service Provider

Nature of registration : Registration of a single premise

Taxable services provided : Tour operator services

ADDRESS OF PREMISES FOR WHICH REGISTRATION IS SOUGHT

Name Of Premises/Building : CAPITAL TOWERS Flat / Door / Block No : TC.14/1222(3), SECOND FLOOR

Road / Street / Lane : MAIN ROAD Village / Area / Lane : KUMARAPURAM

Block / Taluk / Sub-Division / Town : THIRUVANANTHAPURAM Post Office : MEDICAL COLLEGE

City / District : THIRUVANANTHAPURAM State / Union Territory : KERALA

PIN : 695011 Phone Number-1 : 2219157

Phone Number-2 : 9388009097

Fax Number-1 :

Fax Number 2 :

Email Address : manu@dkhhospitality.com

Commissionerate : TRIVANDRUM

Division : SERVICE TAX DIVISION TRIVANDRUM

Range : SERVICE TAX GROUP-D

NAME, ADDRESS AND PHONE NUMBER OF PROPRIETOR / PARTNER / DIRECTOR / TRUSTEES ALONG WITH DETAILS OF AUTHORIZED SIGNATORIES

Name : MANU PV Designation : Director

Address : PALAKKALAZHIKOM CHERUKADAVU SHALIACKARA PUNALUR HO QUILON 691305 KERALA

Phone Number : 2219157

Email Address : -

Declaration

I, MANU PV, hereby declare that the information given in this application form is true, correct and complete in every respect and that I am authorised to sign on behalf of the Registrant.

(a) For new Registration : I would like to receive the Registration Certificate by mail/by hand/E-MAIL

(b) For amendments to information pertaining to existing Registrant : Date from which amendments are made:

Date : 06/02/2015