

Stamp Duty (Special Provisions) Act

Registration Form for Compounding Authority

Name of Institution seeking authority to compound	
Address
TIN (Tax payer Identification No.) if available	
Telephone Number	
If Compounding Authority is not the Principal Institution, the name of the Principal Institution	
TIN of the Principal Institution	

Date :

Signature :

Designation of the Officer :

(Rubber Stamp)

❖ Please submit the certified copy of the TIN Certificate

Office Use Only

Stamp Duty Registration No.	:
Issued on	:
Signature	:
Date	: