

FORM OF AUTHORISATION

[See Rule 4 (6)]

FORM VAT 129

**Authorisation given by the dealer residing outside the state
but carrying business in the state of Andhra Pradesh**

Date Month Year

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01. Tax Office Address: _____ _____ _____
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02	TIN																		
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03. Name : _____ Address: _____ _____ _____
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I _____ S/o/D/o/W/o _____ being
(title) _____ of the above enterprise applied for VAT registration
to carry on business in Andhra Pradesh as a non-resident dealer.

I hereby authorise Sri _____ S/o. _____
address _____ to conduct business on my behalf.

Signature & Status of person authorizing

I accept the above responsibility.

Signature & Status of person authorised