



Government of Balochistan
Balochistan Revenue Authority
Sign-Up Form for BRA Withholding Agent
Balochistan Sales Tax Special Procedure (Withholding) Rules, 2018

BSTW-01
Section-14
Rule-3(2)

	1	Sheet No. <input type="text"/> Of <input type="text"/> Token No. <input style="width: 150px;" type="text"/>
Registry	2	Apply for <input type="checkbox"/> BRA Withholding Agent not holding any BNTN <input type="checkbox"/> Change in particulars <input type="checkbox"/> BNTN
	3	Authorization: <input type="checkbox"/> Balochistan Revenue Authority is authorized to obtain my registration / enrolment particulars from FBR and other Provincial Revenue Authorities. This option is applicable only to taxpayers already registered with FBR and authorizing BRA Portal to transfer the registration / enrolment particulars from FBR Portal.
	4	Taxpayer Type: <input type="checkbox"/> Individual <input type="checkbox"/> AOP <input type="checkbox"/> Company
	5	Status: <input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident (Name of country _____)
	6	Name: _____ For company Reg. / Incorporation No. _____ Name of registered person (Individual, AOP or Company) Date of Incorporation. _____
	7	CNIC No. <input style="width: 100px;" type="text"/> For resident individual, Date of Birth. _____ Non-resident to write Passport (PP) No. _____
	8	Address: Registered Office Address for Company and Mailing / Business Address for Individual and AOP, for all correspondence. _____ Office / Shop / House / Flat / Plot No. Street / Lane / Plaza / Floor / Village Block / Mohalla / Sector / Road / Post Office etc. _____ Province District City / Tehsil (With Zip Code) Area / Town
	9	Principal Service: _____ Service Code: <input style="width: 50px;" type="text"/>
	Agent Particulars u/s 73	10
11		CNIC / NTN: _____ Name: _____
12		Address: _____ Office / Shop / House / Flat / Plot No. Street / Lane / Plaza / Floor / Village Block / Mohallah / Sector / Road / Post Office etc. _____ Province District City / Tehsil (with Zip Code) Area / Town
13		Phone: _____ Mobile _____ Fax _____ Area Code Number Area Code Number Area Code Number
14		E-Mail: _____ (e-mail address for all correspondence)
Bank Accounts	15	Total No. of Bank Accounts: _____ provide details of all bank accounts, use additional copies of this form, if needed.
	16	Account Sr. _____ Action Required: <input type="checkbox"/> Add <input type="checkbox"/> Change <input type="checkbox"/> Close
	17	A/C No. _____ A/C Title _____ Type _____
	18	Bank Name: _____ City _____ Branch _____ (NBP, MCB, HBL, UBL, City etc.)
	19	Account Opening Date: _____ Account Close Date, if close action is requested _____

Declaration	20	<p>I, the undersigned in capacity as _____, do hereby solemnly declare that to the best of my knowledge and belief, the information given above is correct and complete in all respects. It is further declared that any letter or information or notice sent on the E-email / E-portal / Address given in the registry portion, will be accepted as legal notice served under the law. I also hereby authorize the Balochistan Revenue Authority to obtain my/our registration data from the Federal Board of Revenue and other Provincial Tax Authorities.</p> <p style="text-align: center;"> _____ Date CNIC / Passport No. Name of Applicant Signature Official Stamp/Seal </p>
Official Area	21	<p>NTN already allotted by FBR: _____ User ID allotted by BRA: _____</p> <p>Date: _____ Tax Office: _____ Signature of Issuing Officer: _____</p>



Government of Balochistan
Balochistan Revenue Authority
Tax Payment Challan Form for Withholding Agent
Balochistan Sales Tax Special Procedure (Withholding) Rules, 2018

BSTW-04
Section-14
Rule-3(7)

BNTN / NTN / FTN :

B										
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Tax Period:

		-	2	0		
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Name: _____

Taxpayer Type:

Individual

AOP

Company

Status:

Resident

Non-Resident (Name of country _____)

Principle Service: _____

Service Category: _____

Service Code: _____

Address : _____

Head of Account: "B02387- Balochistan Sales Tax on Services"

S. No	Description	Amount-PKR
1.	Withholding Sales Tax	
2.	Penalty / Fine (S.48)	
3.	Additional Tax / Default Surcharge (S.49)	
4.	Arrears	
Total Amount of Payment		

Amount (in words): _____

Mode and Particulars of Payment.

Mode of Payment

Cash

Cheque

Pay Order

Demand Draft

Others

Cheque / Pay Order/ Draft No. _____

Date: _____

Bank / Branch Name / City / Br. Code: _____

Declaration of Depositor

I, hereby declare that the particulars mentioned in this tax payment challan are correct to the best of my knowledge and belief.

Name: _____

CNIC: _____

Date: _____

(BAR CODE) / PSID

 Signature of Depositor

Note. This is an input form and should not be signed / stamped by the Bank. A Computerized Payment Receipt (CPR) should be issued after receipt of payment by the Bank.



Government of Balochistan
Balochistan Revenue Authority
Notice for Deduction / Withholding Tax
Balochistan Sales Tax Special Procedure (Withholding) Rules, 2018

BSTW-05
Section-14
Rule-3(1)/4(2)

Ref No. _____

Date: _____

M/s. _____

BNTN: _____

Address: _____

**NOTICE FOR DEDUCTION / WITHHOLDING TAX UNDER RULE 3(1) OF THE BALOCHISTAN SALES TAX SPECIAL
 PROCEDURE (WITHHOLDING) RULES, 2018.**

Dear Sir,

Kindly note that we are the withholding agent under the Balochistan sales Tax Special Procedure (Withholding) Rules, 2018, and that we shall deduct and withhold the prescribed amounts of Balochistan sales tax against your tax invoices in relation to the services provided or rendered by you to us. We hold BNTN/NTN/FTN : _____ E-Sign Up # _____

2. We declare that we are resident in Balochistan and have a place of business in Balochistan and that we qualify to be a Withholding Agent under sub-rule (2) of rule 1 of the Balochistan Sales Tax Special Procedure (Withholding) Rules, 2018.

3. We undertake to deposit the deducted / withheld amounts of Balochistan sales tax in the Balochistan Government's head of account **"B02387-Balochistan Sales Tax on Services"** against a BRA prescribed PSID/CPR/Challan (BSTW-04) in the manner prescribed under the Balochistan Sale Tax Special Procedure (Withholding) Rules, 2018, and we shall provide you a certificate of deduction-cum-deposit in terms of rule 3(11) thereof.

Signature _____

Name _____

CNIC _____

Designation _____

Official Stamp/Seal _____



Government of Balochistan
Balochistan Revenue Authority
Certificate of Deduction / Withholding Tax
Balochistan Sales Tax Special Procedure (Withholding) Rules, 2018

BSTW-06
Section-14
Rule-3(11)

Ref No. _____

Date: _____

CERTIFICATE OF DEDUCTION / WITHOLDING OF THE BALOCHISTAN SALES TAX ON SERVICES.

We _____ BNTN: _____ STRN: _____

located at _____ do hereby certify that we have deducted / withheld the following amounts of the Balochistan Sales Tax on Services provided to us by M/s _____

BNTN/NTN/FTN: _____ or CNIC: _____

Principle Service: _____ Service Category: _____ Service Code: _____

S. No	District	Tax Invoice No.	Tax Invoice date	Value of taxable services	Amount of tax involved
01	02	03	04	05	06

Tax period of the tax return / withholding return in which this tax was paid by the services recipient.	CPR No. (S1-Series) and date in which the deducted / withheld tax amount was included for payment under Balochistan Government's head of account "B02387-Balochistan Sales Tax on Services".	Remarks, if any.
07	08	09

This certificate is issued in pursuance of rule 3(11) of the Balochistan Sales Tax Special Procedure (Withholding) Rules, 2018.

Signature _____

Name _____

CNIC _____

Designation _____

Official Stamp/Seal _____