

Panaji, 5th February, 2025 (Magha 16, 1946)

**SERIES I No. 44**

# OFFICIAL GAZETTE

## GOVERNMENT OF GOA

PUBLISHED BY AUTHORITY

### EXTRAORDINARY

#### GOVERNMENT OF GOA

Department of Finance  
Revenue & Control Division

#### Notification

38/1/2017-Fin(R&C)(287)/27548

Ref.: Notification No. 07/2025–Central Tax, issued by Government of India, Ministry of Finance (Department of Revenue), Central Board of Indirect Taxes and Customs, published in the Gazette of India, Extraordinary, Part II, Section 3, sub-section (i), vide number G.S.R. 72(E), dated the 23rd January, 2025.

In exercise of the powers conferred by Section 164 of the Goa Goods and Services Tax Act, 2017 (Goa Act 4 of 2017), the Government of Goa, on the recommendations of the Council, hereby makes the following rules further to amend the Goa Goods and Services Tax Rules, 2017, namely:—

1. (1) These rules may be called the Goa Goods and Services Tax (Amendment) Rules, 2025.

(2) Save as otherwise provided in these rules, they shall be deemed to have come into force with effect from the 23rd day of January, 2025.

2. In the Goa Goods and Services Tax Rules, 2017 (hereinafter referred to as the said rules), with effect from a date to be notified, after rule 16, the following rule shall be inserted, namely:—

*“16A. Grant of temporary identification number.— Where a person is not liable to registration under the Act but is required to make any payment under the provisions of the Act, the proper officer may grant the said person a temporary identification number and issue an order in Part B of FORM GST REG-12.”.*

3. In the said rules, with effect from a date to be notified, in rule 19, in sub-rule (1), after the words, letters and figures “FORM GST REG-10”, the words, letters and figures “or in the intimation furnished by the composition taxpayer in FORM GST CMP-02” shall be inserted.

4. In the said rules, with effect from a date to be notified, in rule 87, in the sub-rule (4), after the words “common portal”, the words, figures and letters “as per rule 16A” shall be inserted.

5. In the said rules, with effect from a date to be notified, for FORM REG-12, the following form shall be substituted, namely:—

**“FORM GST REG-12**

[See Rule 16(1), 16A]

Reference Number:

Date:

To (Name):

(Address):

Temporary Registration Number/Temporary Identification Number

**Order of Grant of Temporary Registration/Suo Moto Registration/Temporary Identification Number**

Whereas, the undersigned has sufficient reason to believe that you are liable for registration under the Act, and therefore, you are hereby registered on a temporary basis. The particulars of the business as ascertained from the business premises are given as under:

**PART A**

| Details of person to whom temporary registration granted |                                                                                       |                                                                                                                                                                                                                                          |
|----------------------------------------------------------|---------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1.                                                       | Name and Legal Name, if applicable                                                    |                                                                                                                                                                                                                                          |
| 2.                                                       | Gender                                                                                | Male/Female/Other                                                                                                                                                                                                                        |
| 3.                                                       | Father's Name                                                                         |                                                                                                                                                                                                                                          |
| 4.                                                       | Date of Birth                                                                         | DD/MM/YYYY                                                                                                                                                                                                                               |
| 5.                                                       | Address of the Person                                                                 | <div>Building No./Flat No.</div> <div>Floor No.</div> <div>Name of Premises/Building</div> <div>Road/Street</div> <div>Town/City/Locality/Village</div> <div>Block/Taluka</div> <div>District</div> <div>State</div> <div>PIN Code</div> |
| 6.                                                       | Permanent available Account Number of the person, if                                  |                                                                                                                                                                                                                                          |
| 7.                                                       | Mobile No.                                                                            |                                                                                                                                                                                                                                          |
| 8.                                                       | Email Address                                                                         |                                                                                                                                                                                                                                          |
| 9.                                                       | Other ID, if any<br>(Voter ID No./Passport No./Driving License No./Aadhaar No./Other) |                                                                                                                                                                                                                                          |
| 10.                                                      | Reasons for temporary registration                                                    |                                                                                                                                                                                                                                          |

|     |                                                  |  |
|-----|--------------------------------------------------|--|
| 11. | Effective date of registration/<br>/temporary ID |  |
| 12. | Registration No./Temporary ID                    |  |

## 13. Details of Bank Account(s) (Optional)

|                                                                                                     |  |
|-----------------------------------------------------------------------------------------------------|--|
| Total number of Bank Accounts maintained by the applicant<br>(Upto 10 Bank Accounts to be reported) |  |
|-----------------------------------------------------------------------------------------------------|--|

## Details of Bank Account 1

|                 |                                  |  |  |  |  |  |  |      |  |  |  |  |  |  |  |  |  |
|-----------------|----------------------------------|--|--|--|--|--|--|------|--|--|--|--|--|--|--|--|--|
| Account Number  |                                  |  |  |  |  |  |  |      |  |  |  |  |  |  |  |  |  |
| Type of Account |                                  |  |  |  |  |  |  | IFSC |  |  |  |  |  |  |  |  |  |
| Bank Name       |                                  |  |  |  |  |  |  |      |  |  |  |  |  |  |  |  |  |
| Branch Address  | To be auto-populated (Edit mode) |  |  |  |  |  |  |      |  |  |  |  |  |  |  |  |  |

Note – Add more bank accounts.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| (Upload of Seizure Memo/Detention Memo/Any other<br><br><<You are hereby directed to file application for proper registration within ninety days of the issue of this order>><br><br><div style="display: flex; justify-content: space-between;"> <div>           Place:<br/><br/>Date:         </div> <div>           Signature<br/><br/>&lt;&lt;Name of the Officer&gt;&gt;:<br/><br/>Designation/Jurisdiction:         </div> </div> <p>Note: A copy of the order will be sent to the corresponding Central/State Jurisdictional Authority.</p> |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|

**PART B**

Whereas, the undersigned has sufficient reason to believe that you are liable to make any payment under the Act, and therefore, you are hereby granted a temporary identification number as per the following details:

| Details of person to whom temporary identification number has been granted |                                    |                           |                   |
|----------------------------------------------------------------------------|------------------------------------|---------------------------|-------------------|
| 1.                                                                         | Name and Legal Name, if applicable |                           |                   |
| 2.                                                                         | Gender                             |                           | Male/Female/Other |
| 3.                                                                         | Father's Name                      |                           |                   |
| 4.                                                                         | Date of Birth                      |                           | DD/MM/YYYY        |
| 5.                                                                         | Address of the Person              | Building No./Flat No.     |                   |
|                                                                            |                                    | Floor No.                 |                   |
|                                                                            |                                    | Name of Premises/Building |                   |
|                                                                            |                                    | Road/Street               |                   |

|     |                                                                                       |                            |  |
|-----|---------------------------------------------------------------------------------------|----------------------------|--|
|     |                                                                                       | Town/City/Locality/Village |  |
|     |                                                                                       | Block/Taluka               |  |
|     |                                                                                       | District                   |  |
|     |                                                                                       | State                      |  |
|     |                                                                                       | PIN Code                   |  |
| 6.  | Permanent Account Number of the person, if available                                  |                            |  |
| 7.  | Mobile No.                                                                            |                            |  |
| 8.  | Email Address                                                                         |                            |  |
| 9.  | Other ID, if any<br>(Voter ID No./Passport No./Driving License No./Aadhaar No./Other) |                            |  |
| 10. | Effective date of temporary ID                                                        |                            |  |
| 11. | Temporary ID                                                                          |                            |  |

12. Details of Bank Account(s) (Optional)

|                                                                                                     |  |
|-----------------------------------------------------------------------------------------------------|--|
| Total number of Bank Accounts maintained by the applicant<br>(Upto 10 Bank Accounts to be reported) |  |
|-----------------------------------------------------------------------------------------------------|--|

Details of Bank Account

|                 |                                  |  |  |  |  |  |  |      |  |  |  |  |  |  |  |  |  |
|-----------------|----------------------------------|--|--|--|--|--|--|------|--|--|--|--|--|--|--|--|--|
| Account Number  |                                  |  |  |  |  |  |  |      |  |  |  |  |  |  |  |  |  |
| Type of Account |                                  |  |  |  |  |  |  | IFSC |  |  |  |  |  |  |  |  |  |
| Bank Name       |                                  |  |  |  |  |  |  |      |  |  |  |  |  |  |  |  |  |
| Branch Address  | To be auto-populated (Edit mode) |  |  |  |  |  |  |      |  |  |  |  |  |  |  |  |  |

Note – Add more bank accounts.

|                                                                                                      |                            |
|------------------------------------------------------------------------------------------------------|----------------------------|
|                                                                                                      | Signature                  |
| Place                                                                                                | < <Name of the Officer> >: |
| Date:                                                                                                | Designation/Jurisdiction:  |
| Note: A copy of the order will be sent to the corresponding Central/State Jurisdictional Authority." |                            |

By order and in the name of the Governor of Goa.

Pranab G. Bhat, Under Secretary, Finance (R & C).

Porvorim, 5th February, 2025.