



**JABATAN KASTAM DIRAJA MALAYSIA
ROYAL MALAYSIAN CUSTOMS DEPARTMENT**

GST - Adm 11

**PERMOHONAN PENGECUALIAN PENDAFTARAN CUKAI BARANG DAN PERKHIDMATAN
APPLICATION FOR GOODS AND SERVICES TAX REGISTRATION EXEMPTION**

Nota Penting (Important Notes)

- 1) Sila isikan borang ini dengan menaip menggunakan **HURUF BESAR**.
*Please type in using **BLOCK LETTERS**.*
- 2) Sila rujuk Buku Panduan Borang Cukai Barang dan Perkhidmatan (CBP).
Please refer to Goods And Services Tax (GST) Forms Guide.
- 3) Sila rujuk lampiran bagi mengisi butiran yang memerlukan kod.
Please refer to the attachment to fill in the item(s) that requires code.
- 4) Ruangan yang bertanda (*) adalah wajib diisi.
Column with () is a mandatory field.*
- 5) Sila tandakan (X) dalam petak yang berkenaan.
Please tick (X) accordingly.
- 6) Sila hubungi Pusat Panggilan Kastam di talian 1-300-88-8500 / 03-78067200 atau emel ccc@customs.gov.my untuk pertanyaan lanjut.
Please contact Customs Call Center at 1-300-88-8500 / 03-78067200 or email ccc@customs.gov.my for further enquiry.

No. Pendaftaran Perniagaan *
*Business Registration No. **

ATAU / OR

No. Kad Pengenalan Pemohon *
*Applicant Identity Card No. **

**BAHAGIAN A : BUTIRAN PERNIAGAAN
PART A : BUSINESS DETAILS**

1) No. CBP (Jika berkaitan) *
*GST No. (If applicable) **

2) Kod Jenis Perniagaan *
*Type of Business Code **

3) Adakah perniagaan anda didaftarkan di Sabah atau Sarawak ? *
*Is your business registered in Sabah or Sarawak ? **

☐ Ya (Yes)

☐ Tidak (No)

Wajib diisi untuk jenis perniagaan Perkongsian dan Pemilik Tunggal
(Mandatory for Partnership and Sole Proprietorship business type)

4) No Pendaftaran Perniagaan *
*Business Registration No. **

Wajib diisi untuk jenis perniagaan Persatuan, Syarikat, Perkongsian, Pemilik Tunggal dan Perkongsian Liabiliti Terhad
(Mandatory for Association, Company, Partnership, Sole Proprietorship and Limited Liability Partnership business type)

5) Nama Perniagaan *
*Name of Business **

Wajib diisi untuk jenis perniagaan Persatuan, Syarikat, Pihak Berkuasa Tempatan, Perkongsian, Pihak Berkuasa Awam, Pemilik Tunggal, Badan Berkanun dan Perkongsian Liabiliti Terhad
(Mandatory for Association, Company, Local Authority, Partnership, Public Authority, Sole Proprietorship, Statutory Body and Limited Liability Partnership business type)

6) No. Telefon *
*Telephone No. **

7) No. Faks
Fax No.

8) Alamat Emel
Email Address

No. Pendaftaran Perniagaan *
Business Registration No. *

ATAU / OR

No. Kad Pengenalan Pemohon *
Applicant Identity Card No. *

9) Alamat Perniagaan *
Business Address *

Bandar (Town)

Poskod (Postcode)

Kod Negeri (State Code)

BAHAGIAN B : BUTIRAN PEMBEKALAN PART B : SUPPLY DETAILS

10) Peratusan Pembekalan Tempatan Berkadar Sifar *
Percentage of Local Zero-Rated Supplies *

%

11) Peratusan Pembekalan Eksport *
Percentage of Export Supplies *

%

12) Jumlah Pembekalan [Butiran (10+11)] *
Total Supplies [Item (10+11)] *

%

Jumlah peratusan bagi butiran 12 mestilah 100%
Total percentage for item 12 must be 100%

13) Cadangan Tarikh Kuat kuasa Pengecualian *
Proposed Effective Date of Exemption *

HH (DD) – BB (MM) – TTTT (YYYY)

Sekiranya ruangan tidak mencukupi, sila kemukakan kod industri sebagai lampiran (If you have more industry codes, please provide an attachment)

14) Kod Industri *
Industry Code *

Kod (Code)

BAHAGIAN C : AKUAN PART C : DECLARATION

Pemohon mestilah orang yang ditetapkan.
(Applicant must be a designated person).

Saya, mengaku bahawa maklumat dinyatakan dalam borang ini adalah benar, betul dan lengkap.
I, hereby declare that the information stated in this form are true, correct and complete.

15) Nama Pemohon *
Name of Applicant *

16) No. Kad Pengenalan
Identity Card No.

Baru (New) *

Lama (Old)

17) No. Pasport *
Passport No. *

Wajib untuk warga negara asing (Mandatory for foreign citizen)

18) Kewarganegaraan *
Nationality *

No. Pendaftaran Perniagaan *
Business Registration No. *

ATAU / OR

No. Kad Pengenalan Pemohon *
Applicant Identity Card No. *

19) Jawatan
Designation

20) No. Telefon *
Telephone No. *

21) Tarikh *
Date *

HH (DD) – BB (MM) – TTTT (YYYY)

22) Tandatangan *
Signature *

UNTUK KEGUNAAN PEJABAT (FOR OFFICE USE ONLY)

No. Akuan Terima (Acknowledgement Receipt No.) *

Tarikh Diterima (Received Date) *

HH (DD) – BB (MM) – TTTT (YYYY)

LAMPIRAN (ATTACHMENT)

SENARAI KOD (CODE LIST)

1. Kod Jenis Perniagaan (Type of Business Code)

No.	Kod (Code)	Keterangan	Description
1.	ASS	Persatuan	Association
2.	COM	Syarikat	Company
3.	IND	Individu	Individual
4.	LOC	Pihak Berkuasa Tempatan	Local Authority
5.	PAR	Perkongsian	Partnership
6.	PRO	Profesional	Professional
7.	PUB	Pihak Berkuasa Awam	Public Authority
8.	SOL	Pemilik Tunggal	Sole Proprietor
9.	STA	Badan Berkanun	Statutory Body
10.	LLP	Perkongsian Liabiliti Terhad	Limited Liability Partnership

2. Kod Negeri (State Code)

No.	Kod (Code)	Keterangan (Description)
1.	01	Johor
2.	02	Kedah
3.	03	Kelantan
4.	04	Melaka
5.	05	Negeri Sembilan
6.	06	Pahang
7.	07	Pulau Pinang
8.	08	Perak
9.	09	Perlis
10.	10	Selangor
11.	11	Terengganu
12.	12	Sabah
13.	13	Sarawak
14.	14	Kuala Lumpur
15.	15	Labuan
16.	16	Putrajaya