

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]

To,

The GST Officer,
[GST Department Address]
[City, State, Zip Code]

Subject: Application for Cancellation of GST Registration

Dear Sir/Madam,

I, [Your Name], holding GSTIN [Your GST Number], hereby request the cancellation of my GST registration due to [reason for cancellation, e.g., closure of business, change in business structure, etc.].

Details of my GST registration are as follows:

- GSTIN: [Your GST Number]
- Name of the Business: [Your Business Name]
- Address of the Business: [Business Address]

As per the provisions of the GST Act, I have complied with all requirements and wish to conclude my registration. I request you to process my application at your earliest convenience.

Thank you for your attention to this matter.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Name]

[Your Designation, if applicable]

[Your Business Name]