

[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], am writing to request the cancellation of my GST registration under GSTIN [Your GSTIN]. The details are as follows:

1. **\*\*Name\*\***: [Your Name or Business Name]
2. **\*\*GSTIN\*\***: [Your GSTIN]
3. **\*\*Reason for Cancellation\*\***: [Briefly state the reason, e.g., cessation of business, change of business structure, etc.]
4. **\*\*Date of Cancellation\*\***: [Specify the date you wish the cancellation to take effect]

I kindly request you to process my application and confirm the cancellation of my GST registration at your earliest convenience.

Thank you for your attention to this matter.

Sincerely,

[Your Signature] (if sending a hard copy)

[Your Name]