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**GST Signatory Authorization Template**
**[Your Company Letterhead] **
**Date:** [DD/MM/YYYY]
**To,**
[GST Department/Authority Name]
[Department Address]
[City, State, ZIP Code]
**Subject:** Authorization for GST Signatory
**Dear Sir/Madam,**
This is to formally authorize the following individual(s) to act as the
signatory(ies) for our Goods and Services Tax (GST) submissions and
related matters:
**Authorized Signatory Details:**
1. **Name:** [Full Name]
 **Designation:** [Job Title]
 **PAN:** [Permanent Account Number]
 **Contact Number:** [Phone Number]
 **Email:** [Email Address]
2. **Name:** [Full Name]
 **Designation:** [Job Title]
 **PAN:** [Permanent Account Number]
 **Contact Number:** [Phone Number]
 **Email:** [Email Address]
**Company Details:**
- **Company Name:** [Your Company Name]
- **GSTIN:** [Your GST Identification Number]
- **Address:** [Company Address]
- **City, State, ZIP Code:** [City, State, ZIP Code]
This authorization is effective from [Start Date] and will remain in
effect until further notice or until revoked in writing.
Please feel free to contact us for any further information or
clarification.
Thank you.
**Sincerely, **
[Your Name]
[Your Designation]
[Company Name]
[Contact Number]
[Email Address]
___
**[Company Seal/Stamp (if applicable)]**
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