

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

To,

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

Subject: Application for Cancellation of GST Registration

Dear Sir/Madam,

I, [Your Name], holding GSTIN [Your GST Number], registered under the Goods and Services Tax Act, hereby request the cancellation of my GST registration due to [reason for cancellation, e.g., cessation of business, changes in business structure, etc.].

Details of GST Registration:

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

I confirm that all compliance requirements have been fulfilled and there are no outstanding dues regarding my GST registration. I kindly request you to process my application for cancellation at your earliest convenience.

Thank you for your assistance.

Sincerely,

[Your Signature (if sending a hard copy)]
[Your Name]