

GST G3
APPLICATION FOR DEREGISTRATION OF GROUP
The Comptroller of Goods and Services Tax
55 Newton Road Revenue House Singapore 307987
Tel: 1800 356 8633



Important Notes:

- (1) This form may take 15 minutes to complete.
- (2) Please refer to the e-Tax Guide "[General Guide on GST Group Registration](#)" before completing this form.
- (3) Scan and submit the completed application via myTax Portal (mytax.iras.gov.sg) [select "Email Us (myTax Mail)"] using the Group GST Registration Number. **Do not send this application via email, post or by hand.**
- (4) IRAS will notify all members of the outcome of the application. IRAS will send an SMS or email notification to the mobile number or email of the members as updated in myTax Portal. You will need to log in to myTax Portal (select "View Notices") to view or download the letter. Please update your contact details in myTax Portal, if necessary.

Section 1 : Particulars of the Group

Name of Representative Member

Group GST Registration Number

Please provide the registered address of each member including the representative member in a separate attachment. If there is a change in the registered address, please forward the Accounting And Corporate Regulatory Authority (ACRA) Business Profile on the change in registered address.

Section 2 : Proposed Deregistration Date

D D M M Y Y Y Y

Note : Application must be made at least 90 days before the proposed date.

Section 3 : Reason(s) for Deregistration of Group

Section 4 : Major Exporter Scheme (MES) or Import GST Deferment Scheme (IGDS)

(Please tick accordingly)

Is the group currently under MES or IGDS?

Yes No

Group MES or IGDS status will be revoked upon deregistration of the group. To apply for MES or IGDS, each individual member must provide the [GST F10 Form \(Application for MES\)](#) or [GST F22 Form \(Application for IGDS\)](#) together with this application.

Section 5 : Contact Person

Name	<input type="text"/>	Company & Designation	<input type="text"/>
Local Telephone Number	<input type="text"/>	Email Address	<input type="text"/>

Section 6 : Declaration

All members (including the Representative Member) of the group must declare and sign.

We declare that the information given on this form and accompanying documents are true and complete.

Representative Member

Name of Representative Member:	<input type="text"/>	Signature of Director:	<input type="text"/>
Full name of signatory :	<input type="text"/>	Date :	<input type="text"/>

Name of Proposed New Member / Name of Proposed Member to be removed

Name of Member :	<input type="text"/>	Signature of Director:	<input type="text"/>
Full name of signatory :	<input type="text"/>	Date :	<input type="text"/>

Name of Member :	<input type="text"/>	Signature of Director:	<input type="text"/>
Full name of signatory :	<input type="text"/>	Date :	<input type="text"/>

Name of Member :	<input type="text"/>	Signature of Director:	<input type="text"/>
Full name of signatory :	<input type="text"/>	Date :	<input type="text"/>

Name of Member :	<input type="text"/>	Signature of Director:	<input type="text"/>
Full name of signatory :	<input type="text"/>	Date :	<input type="text"/>

Name of Member :	<input type="text"/>	Signature of Director:	<input type="text"/>
Full name of signatory :	<input type="text"/>	Date :	<input type="text"/>

If there is insufficient space, please make a copy of this page and submit it together with this form

Please make sure that this form is fully completed & duly signed before submission