

8. Address for Communication

☐ Residence☐ Office

(Please tick as applicable)

9. Telephone Number & Email ID details

Country code

Area/STD Code

Telephone / Mobile number

Email ID

10. Status of applicant

Please select Status, ☒ as applicable☐ Individual☐ Hindu undivided family☐ Company☐ Partnership Firm☐ Government☐ Association of Persons☐ Trusts☐ Body of Individuals☐ Local Authority☐ Artificial Juridical Persons☐ Limited Liability Partnership

11. Registration Number (for company, firms, LLPs, etc.)

12. In case of a citizen of India, then

Please mention your AADHAAR number (if allotted)

13. Source of Income

Please select status, ☒ as applicable☐ Salary☐ Income from Business / ProfessionBusiness/Profession code. [For Code: Refer instructions]☐ Income from House property☐ Capital Gains☐ Income from Other sources☐ No income

14. Representative Assessee (RA)

Full name, address of the Representative Assessee, who is assessable under the Income Tax Act in respect of the person, whose particulars have been given in the column 1-13.

Full Name (Full expanded name: initials are not permitted)

Please select title, ☒ as applicable☐ Shri☐ Smt.☐ Kumari☐ M/s

Last Name / Surname

First Name

Middle Name

Address

Flat/Room/ Door / Block No.

Name of Premises/ Building/ Village

Road/Street/ Lane/Post Office

Area / Locality / Taluka/ Sub - Division

Town / City / District

State / Union Territory

Pincode / Zip code

Country Name

15. Documents submitted as Proof of Identity(POI) and Proof of Address (POA)

I/We have enclosed as proof of identity and as proof of address.

[Please refer to the instructions (as specified in Rule 114 of I.T. Rules, 1962) for list of mandatory certified documents to be submitted as applicable]

16. I/We , the applicant, in the capacity of

do hereby declare that what is stated above is true to the best of my/our information and belief.

Place

Date

D D

M M

Y Y

Y Y

Signature / Left Thumb Impression of Applicant
(inside the box)