



**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 Person

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

Capital Gains

Income from Business/Profession

Business/Profession Code

[For Code: Refer instructions]

Income from Other sources

Income from House Property

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

**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

D D M M Y Y Y Y

Date

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