



State / Union Territory  Pincode / Zip code  Country Name

**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  
 Trusts     Body of Individuals     Local Authority     Artificial Juridical Persons     Association of 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     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

**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

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