

*[See section 203A and rule 114A]*

To,  
Assessing Officer (TDS / TCS)

Assessing Officer Code (TDS / TCS)	
Area code	
AO Type	
Range Code	
AO Number	

And whereas no Tax Deduction Account Number / Tax Collection Account Number or Tax Deduction Account Number and Tax Collection Account Number has been allotted to \*me/us;

\*1 / We give below the necessary particulars:

[ Please refer to instructions before filling up the form ]

**1 Name -** (Fill only one of the columns 'a' to 'h', whichever is applicable.)

**(a) Central / State Government:**

Tick the appropriate entry

## Central Government

--	--

## State Government

t	
---	--

Local Authority (Central Govt.)

--	--

Local Authority (State Govt.)

--	--

Name of Office

[illegible]

Name of Organisation

[illegible]

Name of Department

[illegible]

Name of Ministry

[illegible]

Designation of the person responsible  
for \* making payment / collecting tax

[illegible]

**(b) Statutory / Autonomous Bodies :**

Tick the appropriate entry

### Statutory Body

1

## Autonomous Body

--	--

Name of Office

[illegible]

Name of Organisation

[illegible]

Designation of the person responsible  
for \* making payment / collecting tax

[illegible]



