**Form No. 49B**

**[See Section 203 And 206CA And Rules 114A And 114AA]**

**Form Of Application For Allotment Of Tax Deduction Account Number Under Section 203A And Tax Collection Account Number Under Section 206CA Of The Income-Tax Act, 1961**

To

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| The Assessing Officer  |  |
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Sir,

Whereas I/ \* we am/\* are liable to deduct/ \* collect ax in accordance with Chapter XVII under the heading ‘B.-Deduction at source /\* “BB – Collection at source” of the Income-tax Act, 1961;

And whereas no tax deduction account number /\* tax collection account number has been allotted to me/\*us;

I/ \* We hereby request that a tax deduction account number /\* tax collection account number be allotted to me/\*us;

I/ \* We give below the necessary particulars :

 1. Name (Please see notes before filling up). Fill only one of the columns ‘a’ to ‘h’ whichever is applicable.

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| a. Central / State Government : |
| Name of Office |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Name of Organization |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Name of Department |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Name of Ministry |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Designation of person |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| responsible for making payment/ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| \* collectiog tax |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| b. Statutory/Autonomous Bodies/ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| local Authorities |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Name of Office |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Name of Organization |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Designation of person |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| responsible for making payment/ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| \*collecting tax |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| c. Company : |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Name of Company |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Name of Division |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Designation of principal officer or any |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| officer responsible for making payment/ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| \*collecting tax |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| d. Branch of a Company : |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Name of Company |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Name of Division |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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\*Delete whichever is inapplicable.

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| Name/Location of Branch |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Designation of principal officer |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| or any officer responsible for |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| making payment/\* collecting tax |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| e. Individual/Hindu Undivided Family (Karta) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Last Name/Surname |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| First Name |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Middle Name |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| f. Branch of Individual Business (Sole proprietorship concern)/Hindu Undivided Family (Karta) |
| Name of Individual/Hindu Undivided Family (Karta) |
| Last Name/Surname |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| First Name |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Middle Name |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Name/Location of Branch |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| g. Firm/Association of persons/ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Association of persons (Trusts)/ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Body of Individuals/Artificial |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Juridical person |
| h. Branch of Firm/Association of persons/Association of persons (Trusts)/Body of Individuals/Artificial Juridical person |
| Name of Firm/Association of persons/Association of persons (Trusts)/Body of Individuals/Artificial Juridical person |
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| Name/Location of Branch |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 2. Address |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| a. Mailing Address |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Flat/Door/Block No. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Name of Premises/Building |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Road/Street/Lane |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Area/Locality |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Town/City/District |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| State |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Pin Code |  |  |  |  |  |  |

 b. Telephone No.

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| STD Code |  |  |  |  |  | Telephone No |  |  |  |  |  |  |  |  |  |  |
| 3. Nationality of Deductor/\* Collector (Tick b the appropriate entry) | Indian |  | Foreign  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

 4. Category of Government Deductor/\* collector (Tick b the appropriate entry)

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| --- | --- | --- | --- | --- |
|  | Central Government |  | Central Government Company/Corporation established by a Central Act |  |
|  | State Government |  | State Government Company/Corporation established by a State Act |  |
|  | Local Authority |  |

 5. Date on which the tax was first deducted in accordance with

|  |  |  |  |  |  |  |  |  |  |  |
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| provisions of Chapter XVII |  |  |  |  |  |  |  |  |  |  |

 6. Nature of Payment (Tick b whichever is applicable)

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| --- | --- | --- | --- |
| Payment | Section | Code | Tick b here |
| Salary to Union Government Employees  | 192 | 92A |  |
| Salary to employees other than Union Govt. Employees  | 192 | 92B |  |
| Interest on Security  | 193 | 193 |  |
| Dividend  | 194 | 194 |  |
| Interest other than interest on Securities  | 194A | 94A |  |
| Winning from lottery or crossword puzzle  | 194B | 94B |  |
| Winning from horse race  | 194BB | 4BB |  |
| Contractors and Sub-Contractors  | 194C | 94C |  |
| Insurance commission  | 194D | 94D |  |
| Payment to non-resident sportsmen, etc.  | 194E | 94E |  |
| National Saving Schemes (NSS)  | 194EE | 4EE |  |
| Repurchase of units by Mutual Funds or Unit Trust of India  | 194F | 94F |  |
| Commission on sale of lottery tickets  | 194G | 94G |  |
| Rent  | 194-I | 94-I |  |
| Other sums  | 195 | 195 |  |
| Income in respect of units of non-residents  | 196A | 96A |  |
| Any income on transfer of units payable to offshore fund  | 196B | 96B |  |
| Interest, dividend, long term capital gain payable to Non-resident  | 196C | 96C |  |
| Income from securities payable to Foreign Institutional investors  | 196D | 96D |  |
| Fees for professional or technical services  | 194J | 94J |  |
| Income in respect of units  | 194K | 94K |  |
| Commission or brokerage | 194H | 94H |  |

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| 7. Date on which the tax was first collected in accordance with |  |  |  |  |  |  |  |  |  |  |  |  |
|  Provisions of Chapter XVII |  |  |  |  |  |  |  |  |  |  |  |  |

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| 8. Nature of collections under section 206C (Tick b whichever is applicable) |  |  |
| Goods | Section | Code | Tick b here |
| Liquor for Human Consumption (Not IMFL)  | 206C | 6CA |  |
| Timber obtained under forest lease  | 206C | 6CB |  |
| Timber obtained by any mode other than forest lease  | 206C | 6CC |  |
| Any other forest produce (not being timber)  | 206C | 6CD |  |

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| 9. Permanent Account Number (specify wherever applicable) |  |  |  |  |  |  |  |  |  |  |  |  |
| 10. a. Existing Tax Deduction Account Number (TAN), if any |  |  |  |  |  |  |  |  |  |  |  |  |
| b. Ward/Circle/Range |  |
| 10. Date |  |  | - |  |  | - |  |  |  |  |
|  |  |
|  | Signed (Applicant) |
|  |  |

**Verification**

I/we\* in my/our \* capacity as do hereby declare that what is stated above is true to the best of my/our \* knowledge and belief.

 Verified today this the day of at

|  |  |
| --- | --- |
|  |  |
|   | Signed (Applicant)  |

 \* Delete whichever is inapplicable.

 Notes :

1. Before signing the verification, the declarant should satisfy himself that the information furnished in the declaration is true, correct and complete in all respects. Any person making a false varification in the declaration shall be liable to be prosecuted under section 277 of the I.T. Act, 1961, and on conviction be punishable with rigorous imprisonment and fine.

2. Name of the assessee should be written in full and not in abbreviated form. As an exception, very large Middle names may be abbreviated. While filling in name, please do not prefix it with Shri, Smt., M/s, Kumari, Late, Major, Dr., etc. Please leave a blank box between any two parts of the name. In the case of Hindu Undivided Family, Firm, Association of Persons, Association of Persons (Trusts), Local Authority or Artificial Juridical Person, initials may be used only if they are part of a registered name.

3. Mailing addresses should be given in the specified format. PIN must be mentioned.

4. Give the STD code in the boxes provided and give the contact telephone number, if any.

5. Tick b only one of the appropriate boxes.

6. Give date in the format DD-MM-YYYY.

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| Example : Write date 21-9-2002 as | 2 | 1 | - | 0 | 9 | - | 2 | 0 | 0 | 2 |