Form No. 49B

[See section 203A and rule 114A]
Form of application for allotment of Tax Deduction and Collection Account Number under Section 203A of the Income Tax Act, 1961

Го,		
Assessing Officer (TDS / TCS)		
Assessing Officer Code (TDS / TCS)		
Area code AO Type	<u> </u>	
Range Code	 	
AO Number		
Sir,		
	or deduct tax and collect tax in accordance with Chapter XVII under the home-tax Act, 1961;	eading *'B Deduction
And whereas no Tax Deduction Account Numb Number has been allotted to *me/us; *I/We give below the necessary particulars:	r/Tax Collection Account Number or Tax Deduction Account Number and	Tax Collection Account
Please refer to instructions before filling up the	form]	
Name - (Fill only one of the columns 'a' to 'h		
(a) Central / State Government:	, ,	
		(a a)
Tick the appropriate entry	Central Government State Government Local Authority (Central Govt.)
	Local Authority (State Govt.)	
Name of Office		
Name of Organisation		
Name of Organisation		
Name of Department		
Name of Ministry		
Designation of the person responsible for * making payment / collecting tax		
(b) Statutory / Autonomous Bodies :		
Tick the appropriate entry	Statutory Body Autonomous Body	
Name of Office		
Name of Organisation		\top
-		
Designation of the person responsible		
for * making payment / collecting tax		

(c) Company (See Note 1) :																									
Tick the appropriate entry	Government Company/Corporation Governmen										Other														
Title (M/s) (tick if applicable)	established by a Central Act established by a State Act Company							У																	
	_									1												_			_
Name of Company	L																					<u></u>	Ш		
Designation of the person responsible																									
for * making payment / collecting tax																									$\overline{}$
(1) Provide (Division of a Community						<u> </u>									<u> </u>										_
(d) Branch/Division of a Company: Tick the appropriate entry	Gov	ernr	nen	t Co	mn	anv/	'Cor	nora	ıtion		_	Gov	ernr	nen	t Co	nmn	anv	(Cor	nor	ation	1	C	ther	_	٦
not the appropriate entry	esta									<u> </u>	_		blisł						por	2001			omp		J
Title (M/s) (tick if applicable)																									
Name of Company																									
																									$\overline{}$
Name of Division																 			 						\exists
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																<u> </u>					Ш		Ш		ᆜ
	L																					<u>_</u>	Ш		ᆜ
Name/Location of Branch	L																								
Designation of the person responsible																									
for * making payment / collecting tax																									
(e) Individual / Hindu Undivided Family (K	arta)	- (S	See	Not	e 2)	:																			
Tick the appropriate entry	Indi		_				indu	ı Un	divid	ded	Fan	nily													
Title (tick the appropriate entry for individ	lual)		_	Shr	 i				Sm	ıt. 🗌				K	uma	ıri [
Last Name / Surname																									
First Name																									
Middle Name																									
(f) Branch of Individual Business (Sole proprietorship concern)/ Hindu Undivided Family (Karta)																									
Tick the appropriate entry	Brai	nch	of Ir	div	idua	l bu	sine	ss			E	3ran	ich d	of H	indu	ı Un	divid	ded	Fan	nily					
Individual/ Hindu Undivided Family (Karta	a):																								
Title (tick the appropriate entry for individ	lual)		;	Shri					Sm	ıt. 🗌				Kı	uma	ri 🗌									
Last Name / Surname																									
First Name																									
Middle Name																									
Name/Location of branch																									
(g) Firm / Association of Persons / Association of Persons (Trusts) / Body of Individuals / Artificial Juridical Person (See Note 3) :																									
Name																									
																									\neg
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(h) Branch of Firm / Association of Pers	sons / Association of Persons (Trusts) / Body of Individuals / Artificial Juridical Person:
Name of Firm / Association of Persons	s / Association of Persons (Trusts) / Body of Individuals / Artificial Juridical Person:
Name/Location of branch	
Address	
Flat / Door / Block No.	
Name of Premises / Building / Village	
Road / Street / Lane / Post Office	
Area / Locality / Taluka / Sub-Division	
Town / City / District	
State / Union Territory	
PIN code	
Telephone No.	STD Code Phone No.
e-mail IDs a)	
o man 120° ay	
b)	
b)	
Nationality of Deductor (Tick the appropriate indian Foreign Permanent Account Number (PAN) - (sp	pecify wherever applicable)
Existing Tax Collection Account Number	er (if anv)
Date (DD-MM-YYYY)	
	Signed (Applicant) Verification
We, in rethe best of my/our knowledge and belerified today the	my/our capacity asdo hereby declare that what is stated above is tillief.
	<u> </u>
at otes :	

- 1 This column is applicable only if a single TAN is applied for the whole company. If separate TANs are applied for different divisions/branches, please fill details in (d).
- 2 For branch of Individual business/Hindu Undivided Family, please fill details in (f).
- 3 For branch of firm/Association Of Persons/Association Of Persons (Trust) / Body Of Individuals/Artificial Juridical Person, please fill details in (h).
- * Delete whichever is inapplicable.