



## 9 Telephone Number &amp; Email ID details

Country code

Area/STD Code

Telephone / Mobile number

Email ID

## 10 Status of applicant

Please select status,  as applicable Government Individual Hindu undivided family Company Partnership Firm Association of Persons Trusts Body of Individuals Local Authority Artificial Juridical Persons Limited Liability Partnership

## 11 Registration Number (for company, firms, LLPs etc.)

## 12 Please mention your AADHAAR number (if allotted)

## 13 Source of Income

Please select,  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), Proof of Address (POA) and Proof of Date of Birth (DOB)

I/We have enclosed  as proof of identity, as proof of address and  as proof of date of birth.

[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]

[Annexure A, Annexure B &amp; Annexure C are to be used wherever 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 :  D D M M Y Y Y Y

My Signature

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