## **FORM NO. 39**

## $[See \>\> {\rm rule}\> 54]$ Form of application for registration as authorised income-tax practitioner

To The C	hief Commissioner or Commissioner of	f Income-tax,	
	by apply for registration as an authorise come-tax Act, 1961.	d income-tax practition	er under clause (v)/(vi)/(vii) of section 288(2) of the
The fo	ollowing particulars are furnished herew	vith :-	
1.	Name in full [block letters]		
2.	Father's name		
3.	Permanent residential address		
4.	Present residential address		
5.	Professional address(es) in India		
6.	Principal place of profession in India		
7.	If partner in a firm, name of the firm and other partners		
	Name and address of assessee	Assessment year	Designation of the income-tax authority before whom appeared
I certify that I have been practising as an authorised income-tax practitioner since and that I have not so far made any application for registration as an authorised income-tax practitioner to any other Chief Commissioner or Commissioner of Income-tax.			
			Signature
Verification  I,, do declare that what is stated in the above application is true to the best of my information and belief			
Date_			Signature