FORM NO. 49B

[See sections 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

То

The Assessing Officer (TDS/TCS)

Assessing Officer	
Code (TDS/TCS)	
Area Code	
АО Туре	
Range Code	
AO Number	

Sir,

Whereas I/we am/are liable to deduct/collect tax or deduct tax and collect tax in accordance with Chapter XVII under the heading '*B. - Deduction at source*' or '*BB.-Collection at source*' of the Income-tax Act, 1961;

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;

I/we give below the necessary particulars:

[Please refer to the 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	Local Authority (Central Government)														
Name of Office															
Name of Organization															
Name of Department															
Name of Ministry															
Designation of person responsible for making payment/ collectiog tax															
b. Statutory/autonomous bodies Tick the appropriate entry Statutory Body		Aut	onom	nous	Bod	y						<u> </u>			

		-											1			-										
Name of Office			_																							
Name of Organization																										
Designation of person																										
responsible for making payment/																										
collecting tax	-		1																							
c. Company : (See Note 1)								•																		
Tick the appropriate entry																										
Central Government Company/Company									omp		//Co	omp	any	/												
established by a Central Act			est	ablis	shee	d by	as	Stat	e Ao	ct																
Other Company																										
Title (M/s.) (Tick, if applicable)														r	1	1		1								
Name of Company																										
Designation of person																										
responsible for making payment/ collecting tax														-	-											
d. Branch/Division of a Company :																										
Tick the appropriate entry	L			1										I	I											
Central Government Company/Company			Sta	te C	Sove	ernn	nen	t Co	omp	any	//Co	omp	any	/			٦									
established by a Central Act Other Company			est	ablis	she	d by	aŝ	Stat	e Ao	ct																
Title (M/s.) (Tick, if applicable)																										
Name of Company	_		T																	\neg						
	<u> </u>														Ì					\dashv						
Name of Division	<u> </u>	 	+																	=						
																				_						
Name/Location of Branch																										
Designation of person		1	$\frac{1}{1}$	1									ĺ	I I	1	1				╡						
responsible for			-																							
making payment/collecting tax																										
e. Individual/Hindu Undivided Family (Karta	i) (S	ee	Note	;																						
2)	, (
Tick the appropriate entry																										
Individual			Hin	du ı	undi	vide	ed f	ami	ly																	
Title (Tick the appropriate entry for individu	al)													_												
Shri Smt.							Kı	uma	ari							1										
Last Name/Surname																										
First Name																										

f. Branch of Individual Business (Sole proprietorship concern)/Hindu Undivided Family (Karta) Tick the appropriate entry

Branch of individual business			Bra	nch	of	Hind	du ι	Indiv	vide	ed fa	amil	у								
Individual/Hindu undivided family (karta) Title (Tick the appropriate entry for individua Shri Smt.	lual) Kumari																			
Last Name/Surname				_																
First Name																				\square
Middle Name																				
Name/Location of Branch																				
g. Firm/Association of persons/ associationNote 3)Name	of p	bers	ons	s (tri	usts	s)/ b	ody	of i	ndiv	vidu	ial/a	rtifi	cial	juri	dica	al pe	erso	n (S	See	
h. Branch of firm/association of persons/as person	soci	atio	n of	f pe	rsoi	ns (†	trus	ts)/I	boc	y of	ind	ivid	ual/	′arti	ficia	ıl ju	idic	al		
Name of firm/association of persons/ association of persons (trusts)/																				
body of individual/artificial juridical person																				
Name/Location of Branch																				
2. Address	<u> </u>				· <u> </u>															1
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																		I		
(Indicating PIN is mandatory)																				
Telephone No. STD Code			elep o.	bhor	ne															
e-mail ID (a)						_						T								
 (b))			Ir	ndia	n				F	=ore	eign								
5. Existing Tax Deduction Account Number	(TA	N),	if aı	ny					<u> </u>	<u> </u>		T			T	T	<u> </u>	\pm	Ï	
6. Existing Tax Collection Account Number				-								\uparrow						╞		
7. Date (DD-MM-YYYY)									-			-	-						-	

Signed (Applicant)

