

Name of Office	<table border="1" style="width: 100%; height: 20px;"></table>
Name of Organization	<table border="1" style="width: 100%; height: 20px;"></table>
Designation of person responsible for making payment/ collecting tax	<table border="1" style="width: 100%; height: 20px;"></table>

c. Company : (See Note 1)

Tick the appropriate entry

Central Government Company/Company
established by a Central Act

☐

State Government Company/Company
established by a State Act

☐

Other Company

☐

Title (M/s.) (Tick, if applicable)

☐

Name of Company

Designation of person

responsible for making payment/
collecting tax

d. Branch/Division of a Company :

Tick the appropriate entry

Central Government Company/Company
established by a Central Act

☐

State Government Company/Company
established by a State Act

☐

Other Company

☐

Title (M/s.) (Tick, if applicable)

☐

Name of Company

Name of Division

Name/Location of Branch

Designation of person

responsible for
making payment/collecting tax

e. Individual/Hindu Undivided Family (Karta) (See Note 2)

Tick the appropriate entry

Individual

☐

Hindu undivided family

☐

Title (Tick the appropriate entry for individual)

Shri

☐

Smt.

☐

Kumari

☐

Last Name/Surname

First Name

Middle Name

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

Tick the appropriate entry

Branch of individual business

☐

Branch of Hindu undivided family

☐

Individual/Hindu undivided family (karta)
Title (Tick the appropriate entry for individual)

Shri ☐

Smt. ☐

Kumari ☐

Last Name/Surname

First Name

Middle Name

Name/Location of Branch

g. Firm/Association of persons/ association of persons (trusts)/ body of individual/artificial juridical person (See Note 3)

Name

h. Branch of firm/association of persons/association of persons (trusts)/body of individual/artificial juridical person

Name of firm/association of persons/

association of persons (trusts)/

body of individual/artificial juridical person

Name/Location of Branch

2. 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

(Indicating PIN is mandatory)

Telephone No.

STD Code

Telephone No.

e-mail ID

(a)

(b)

3. Nationality (Tick ✓ the appropriate entry)

Indian

Foreign

4. Permanent Account Number (PAN)

5. Existing Tax Deduction Account Number (TAN), if any

6. Existing Tax Collection Account Number (TCN), if any

7. Date (DD-MM-YYYY)

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.

Verify today, the

- -
D D M M Y Y Y Y

(Signature/Left Thumb Impression of
Applicant)

Note:

1. This column is applicable only if a single TAN is applied for the whole company. If separate TAN is 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/AOP/AOP (Trust)/BOI/artificial juridical person, please fill details in *(h)*.
4. *Delete whichever is inapplicable.