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

To,
Assessing Officer TDS/TCS

_____

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

Sir,

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

And whereas no tax deduction account number or tax deduction acount number and tax collection account number has been allotted to me/us;
I/we give below the necessary particulars:

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 Govt.) ☐ Local Authority (State Govt.) ☐

Name of Office
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
Designation of the person responsible for making payment / collecting tax

(c) Company:

Tick the appropriate entry — Government Company/Corporation established by a Central Act ☐ Government Company/Corporation established by a State Act ☐ Other Company ☐

Title (M/s) ☐ (tick if applicable)

Name of Company
Designation of the person responsible for making payment / collecting tax

(d) Branch/Division of a Company:

Tick the appropriate entry — Government Company/Corporation established by a Central Act ☐ Government Company/Corporation 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 the person responsible

(e) Individual / Hindu Undivided Family (Karta):

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 Individuals / Artificial Juridical Person:

Name

(h) Branch of Firm / Association of Persons / Association of Persons (Trusts) / Body of Individuals / Artificial Juridical Person:

Name of Firm / Association of Persons / Association of Persons (Trusts) / Body of Individuals / 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 Code

Telephone No. STD Code Phone No.

email Ids a)

b)

3 Nationality of Deductor (Tick the appropriate entry)

Indian ☑

Foreign ☐

4 Permanent Account Number (PAN) – (specify wherever applicable)

5 Existing Tax Deduction Account Number (if any)

6 Existing Tax Collection Account Number (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.

Verified today, the d d m m y y y y

at _____

(Signature/ Left Thumb Impression of Applicant)