





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

Shri  Smt.  Kumari

Last Name/Surname	<input type="text"/>
First Name	<input type="text"/>
Middle Name	<input type="text"/>
Name/Location of Branch	<input type="text"/>

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

Name	<input type="text"/>
	<input type="text"/>

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	<input type="text"/>
Name/Location of Branch	<input type="text"/>

**2. Address**

Flat/Door/Block No.	<input type="text"/>
Name of Premises/Building/Village	<input type="text"/>
Road/Street/Lane/Post Office	<input type="text"/>
Area/Locality Taluka/Sub-Division	<input type="text"/>
Town/City/District	<input type="text"/>
State/Union Territory	<input type="text"/>
PIN	<input type="text"/>

(Indicating PIN is mandatory)

Telephone No.    STD Code     Telephone No.

e-mail ID (a)   
 (b)

**3. Nationality** (Tick ✓ the appropriate entry)

Indian	<input type="checkbox"/>	Foreign	<input type="checkbox"/>
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**4. Permanent Account Number (PAN)**

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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**5. Existing Tax Deduction Account Number (TAN), if any**

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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**6. Existing Tax Collection Account Number (TCN), if any**

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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**7. Date (DD-MM-YYYY)**

<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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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   -   -

(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.