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

To

The 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/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 ☐ Local Authority (Central Government) ☐

State Government ☐ Local Authority (State Government) ☐

Name of Office

Name of Organization

Name of Department

Name of Ministry

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Designation of person responsible for making payment/ collecting tax

b. Statutory/autonomous bodies

Tick the appropriate entry

Statutory Body ☐ Autonomous Body ☐

Name of Office

Name of Organization

Designation of person responsible for making payment/ collecting tax

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 :

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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)

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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)

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Telephone No.	STD Code		Telephone No.	

e-mail ID (a) (b)

3. Nationality (Tick b 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.

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