## Form for Changes or Correction in TAN data for TAN allotted under Section 203A of the Income Tax Act, 1961

Tax Deduction Account No. (TAN)
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] 1	Ca	ategory of Deductor														
960	Tie	ck the appropriate category:														
-	a)	Central Government / State Government	nent / Local Authority													
_	b)	Statutory / Autonomous Bodies														
_	c)	Company														
_	d)	Branch of a Company														
-	e)	Individual / Hindu Undivided Family (	Karta)													
	f)	Branch of Individual Business (Sole p	proprietorship concern)/ Hindu Undivided Family (Karta)													
	g)	Firm / Association of Persons / Association	ciation of Persons (Trusts) / Body of Individuals / Artificial Juridical Person													
	h)	Branch of Firm / Association of Persons / Association of Persons (Trusts) / Body of Individuals / Artificial Juridical Person														
2	Na	ame - (Fill only one of the columns 'a'	to 'h', whichever is applicable.)													
	(a	(a) Central / State Government:														
		Tick the appropriate category Central Government State Government Local Authority (Central Govt.)														
		Local Authority (State Govt.)														
		Name of Office														
		Name of Organisation														
		Name of Department														
		Name of Ministry														
		The common y														
		D. 2 - W CV.														
		Designation of the person														
		responsible for making the payment														
	(b	) Statutory / Autonomous Bodies :														
		Tick the appropriate category	Statutory Body Autonomous Body													
		Name of Office														
		Name of Organisation														
		Designation of the person														

responsible for making the payment						3 3			100								i i					1		
(c) Company: [This column is applicab	le only	if TAN	'is a	llotte	ed to	оас	com	pan	y as	s a ı	vho	le. If	sep	ara	te Ti	4N .	is a <sub>l</sub>	oplie	ed fo	or di	ffere	ent		
divisions/branches, please fill details in (d) 'Branch/Division of a Company' only]																								
Tick the appropriate category	Government Company/Corporation Government Company/Corporation													Oth	er									
	estal	established under a Central Act established under a State Act														Company								
Title (M/s) tick if applicable																								
Name of Company																	je.					4 0		
Designation of the person responsible	е																				L			
for making the payment																								
(d) Branch/Division of a Company:	Branch/Division of a Company:																							
Tick the appropriate category																Other								
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Title (M/s) tick if applicable	Title (M/s) tick if applicable																							
Name of Company					5																			
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Name/Location of Branch					s ()				_											<u>_</u>			Щ	ᆜ
Designation of the person responsible	e																							
for making the payment																								
(e) Individual / Hindu Undivided Fam	ily (Ka	rta) - [	for b	ranc	h o	f Ina	livid	ual,	/ HL	JF, į	olea	se fi	il de	tails	s in (	(f) o	nly]	<b>F</b>						
Tick the appropriate category	Indiv	idual [				H	lind	u Ui	ndiv	ided	d Fa	mily			]									
Title (tick the appropriate entry for in	ndividu	al)		Sh	ri 🗌				Sr	mt. [				K	Kuma	ari			8					
Last Name / Surname																								
First Name		Ĭ																						
Middle Name																								
(f) Branch of Individual Business (So	le pro	prietor	ship	o co	nce	rn)/	Hin	du	Unc	divid	ded	Fan	nily	(Ka	rta)									
Tick the appropriate category	Bran	ch of li	ndivi	dual	bus	sines	ss					Brai	nch	of H	lindı	u Ur	ndiv	ided	l Fa	mily			]	
Individual/ Hindu Undivided Family (	(Karta):																							
Title (tick the appropriate entry for in	or individual) Shri Smt. Kumari																							
Last Name / Surname																							Ш	
First Name																							Ш	
Middle Name																								
Name/Location of branch																					П			$\neg$

	(g) Firm / Association of Persons / Association of Persons (Trusts) / Body of Individuals / Artificial Juridical Person:																									
	[for branch of firm / AOP / AOP (	[for branch of firm / AOP / AOP (Trust) / BOI / Artificial Juridical Person, please fill details in (h) only]																								
	(h) Branch of Firm / Association o	f Person	ıs /	Ass	ocia	atio	n of	Per	rson	ıs (	Trus	sts)	/ Bo	odv	of li	ndiv	/idu	als	/ Ar	tific	ial .	luric	dica	l Pe	rso	n:
	Name of Firm / Association of Pe																									
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	Name/Location of branch																									
	3 Address																									
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	Town / City / District																									
	State / Union Territory	F		Ι																						$\equiv$
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	1 Nationality of Deductor (Tick the a	ppropri	ate	cate	gor	у)																				
	Indian																									
	Foreign																									
	Permanent Account Number (PAN	) - (spec.	ify v	vher	eve	r ap	plica	ble,	)																	
		Ш																								
	Mention other Tax Deduction Acco	ount Nur	nbe	er (T	AN/	s) a	llott	ed	to y	ou,	tha	t ne	ed 1	to b	e sı	ırre	nde	red/	can	cell	ed					
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	e to the best of my/our knowledge a																									
Ve	Verified today thisday of																									

Signed (Applicant)