

## Copy to be retained

## Tax Invoice cum Acknowledgement receipt of TAN Application (Form 49B)

Name of the Applicant	KOMAL SIN	JCH .	GSTIN of Applicant			
Name of the Applicant	KOWAL SII	NGH		NA		
ax Invoice cum Acknowledgement number		Category of Applicant		TAN allotment letter dispatched state		
19165470003971		Individual/Hindu Undivided Family(Kar	ta) UTTAR PRADESH (09)			
Date of application	STD Code	Phone No	TAN app	plication fee	(₹) 55.00	
06 May 2022	91	9536409000	SGST @ 9%		-	
			IGST @ 18%		(₹) 9.90	
Email Id	MOHIT2FAS	ST@GMAIL.COM	Total (Rounded Off)		(₹) 65.00	

FC Managed by NSDL e-Gov) (SAC: 998319)

TIN-FC ID: 19165

Religare Broking Limited

SHOP NO.-2 ASHOKA TOWER

DAMPIER NAGAR

MATHURA - 281001 null

For gueries and information please contact:

PAN/TDS Call Centre: (91)(020)27218080. Fax: (91)(020)27218081 5th Floor, Mantri Sterling, Plot No. 341 Survey No. 997/8, Model Colony, Near Deep Bunglow chowk, Pune- 411016

Email: tininfo@nsdl.co.in

You may track the status of your application using 14 digit Acknowledgment No. on our website www.tin-nsdl.com or by using SMS facility-

Type 'NSDLTAN' <space> 14 digit Acknowledgment No. and send it to 57575

This is a computer generated Receipt and does not require signature.

SAM 1.00

## LOKINI INO. 42D

[See section 203A and rules 114A]

Form of application for allotment of tax deduction and collection account number under section 203A of the Income-tax Act, 1961

The Assessing Officer (TDS/TCS)

Assessing Officer Code (TDS/TCS)		
Area Code	KNP	
AO Type	WT	
Range Code	24	
AO Number	1	

716547003971

To,

Deduction at source' or *'BB-Collection a And whereas no *tax deduction account account number has been allotted to *me/ I/*we give below the necessary particular. [Please refer to the instruction before filling	number / tax collection account number or tax deduction account nu us; s: ng up the form]	
<ol> <li>Name (Fill only one of the columns 'a' t</li> <li>(a) Central / State Government:</li> </ol>	to 'h' whichever is applicable)	Not Applicable
Tick the appropriate entry Central Government State Government	<ul><li>□ Local Authority (Central</li><li>□ Local Authority (State Government)</li></ul>	
Name of Office		
Name of Organization		
Name of Department		
Name of Ministry		
Designation of person responsible for *making payment/collecting tax		
(b) Statutory / Autonomous Bodies/Local A	uthorities:	Not Applicable
Tick the appropriate entry Statutory Body	☐ Autonomous Body	
Name of Office		
Name of Organization		
Designation of person responsible *formaking payment/collecting tax	or	
(c) Company: (See Note 1)  Tick the appropriate entry  Central Government Company/ Comestablished by a Central Act  Other Company	pany  State Government Company/ Company established  Title (M/s.) (Tick, if applicable)	Not Applicable by a State Act
Name of Company		
Name of Division		
Designation of person responsible for *making payment/collecting tax		
(d) Branch/Division of a company:  Tick the appropriate entry  Central Government Company/ Compestablished by a Central Act  Other Company	Dany ☐ State Government Company/ Company established by Title (M/s.) (Tick, if applicable)	Not Applicable  by a State Act
Name of Company		
Name of Division		
Name / Location of Branch		
Designation of person responsible for *making payment/collecting tax		
(e) Individual / Hindu Undivided Family (Ka Tick the appropriate entry	rta) (See Note 2)	Not Applicable

Individual

Hindu undivided family

Last Name's Name Middle Name  (f) Branch of individual business (Sole proprietorship concern)/Hindu undivided family (Karta) Tick the appropriate entry Branch of findividual business Individual Brainess Ind			
Middle Name  (f) Branch of individual business (Sole proprietorship concern)/Hindu undivided family (Karta) Tick the appropriate entry Branch of Individual business individual/Hindu undivided family (karta) Title (Tick the appropriate entry for individual) Smt.	Last Name/Surname		
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Tick the appropriate entry Brauch of Individual business Individual/Hindu undivided family (karta)Title (Tick the appropriate entry for individual)  Last Name/Surname  First Name  Middle Name  Middle Name  Mame / Location of branch (g) Firm/association of persons/association of persons (trusts)/body of individual/artificial judicial Person (See Note 3)  Name  BRIJ MANAGEMENT SERVICES  Not Applicable  Name of firm/association of persons/association of persons (trusts)/body of individual/artificial judicial Person Not Applicable  Name of firm/association of persons (trusts)/body of individual/artificial judicial Person Not Applicable  Name of firm/association of persons (trusts)/body of individual/artificial judicial Person Not Applicable  Name of firm/association of persons (trusts)/body of individual/artificial judicial Person Not Applicable  Name of firm/association of persons (trusts)/body of individual/artificial judicial Person Not Applicable  Name of firm/association of persons (trusts)/body of individual/artificial judicial Person Not Applicable  Name of firm/association of persons (trusts)/body of individual/artificial judicial Person Not Applicable  Name of firm/association of persons (trusts)/body of individual/artificial judicial Person Not Applicable  Name Of firm/association of persons (trusts)/body of individual/artificial judicial Person Not Applicable  Name Of firm/association of persons (trusts)/body of individual/artificial judicial Person Not Applicable  Name Of firm/association of persons (trusts)/body of individual/artificial judicial Person Not Applicable  Name Of firm/association of persons (trusts)/body of individual/artificial judicial Person Not Applicable  National Artificial jud	Middle Name		П
First Name  Middle Name  Name / Location of branch  Name / Location of persons/association of persons (trusts)/body of individual/artificial judicial Person (See Note 3)  Name   BRILJ   MANAGEMENT   SERVICES  Not Applicable  Name of firm/association of persons/association of persons (trusts)/body of individual/artificial judicial Person   Not Applicable  Name of firm/association of persons (trusts)/body of individual/artificial judicial Person   Not Applicable  Name of firm/association of persons (trusts)/body of individual/artificial judicial Person   Not Applicable  Name of firm/association of persons (trusts)/body of individual/artificial judicial Person   Not Applicable  Name of persons/association of persons (trusts)/body of individual/artificial judicial Person   Not Applicable  Name of Premises/Building/Village  Road/Street/Lane/Post Office   2.6	Tick the appropriate entry Branch of Individual business Individual/Hindu undivided family (k.	Branch of Hindu undivided family arta)Title (Tick the appropriate entry for individual)	
Middle Name  Name / Location of branch  (g) Firm/association of persons/association of persons (trusts)/body of individual/artificial judicial Person (See Note 3)  Name  (h) Branch of firm/association of persons/association of persons (trusts)/body of individual/artificial judicial Person  Not Applicable  Name of firm/association of persons (trusts)/body of individual/artificial judicial Person  Not Applicable  Name (Location of persons (trusts)/body of individual/artificial judicial Person  Not Applicable  Name (Location of persons (trusts)/body of individual/artificial judicial Person  Not Applicable  Name (Location of persons (trusts)/body of individual/artificial judicial Person  Not Applicable  Name (Location of persons (trusts)/body of individual/artificial judicial Person  Not Applicable  Not App	Last Name/Surname		
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(h) Branch of firm/association of persons/association of persons (trusts)/body of individual/artificial judicial Person  Not Applicable  Name of firm/association of persons (trusts)/body of individual/artificial judicial Person  Not Applicable  Name of firm/association of persons (trusts)/body of individual/artificial judicial Person  Not Applicable  Name of firm/association of persons (trusts)/body of individual/artificial judicial Person  Not Applicable  N	g) Firm/association of persons/association o	of persons (trusts)/body of individual/artificial judicial Person (See Note 3)	
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persons/association of persons (trusts)/body of individual/ artificial Judicial 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  MATHURA  MATHURA  PRADESH  State/Union Territory  UTTAR PRADESH  c-mail ID  (a) CARAHULGARGG@GMAILL.COM  (b)  3. Nationality of Deductor (Tick the appropriate entry) Indian  Foreign  4. Permanent Account Number (PAN)  5. Existing Tax Collection Account Number (TCN), if any  7. Date (DD-MM-YYYY)  Verification  Verification  Verification  Verification  Verification  Verification  Verification  Verification  Verification  In my/our capacity as PARTNER do hereby declare that what is stated above is true to the best of my/our knowledge and belief.	h) Branch of firm/association of persons/ass	ociation of persons (trusts)/body of individual/artificial judicial Person Not Applical	ole
2. Address:  Flat/Door/Block No.  Name of Premises/Building/Village  Road/Street/Lane/Post Office  Area/Locality Taluka/sub-Division  Town/City/District  MAITHURA  MAITHURA  MAITHURA  Pin Coc  State/Union Territory UTTAR PRADESH  e-mail ID  (a) CARAHULGARGGGGMAILL.COM  (b)  3. Nationality of Deductor (Tick the appropriate entry) Indian  A Permanent Account Number (PAN)  5. Existing Tax Collection Account Number (TCN), if any  6. Existing Tax Collection Account Number (TCN), if any  7. Date (DD-MM-YYYY)  Verification  Verification  Verification  in *my/our capacity as PARTNER do hereby declare that what is stated above is true to the best of my/our convolvedge and belief.	persons/association of persons (trusts)/body		
Name of Premises/Building/Village  Road/Street/Lane/Post Office  Area/Locality Taluka/sub-Division  Town/City/District  MATHURA  MATHURA  Pin Coc  State/Union Territory UTTAR PRADESH  Telephone No.(STD Code & Tel. No.) mail ID mail ID  (a)  CARAHULGARGG@GMAIL. COM  (b)  JAZEB2268  3. Nationality of Deductor (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)  Verification  Verification  Verification  Verification			
Road/Street/Lane/Post Office Area/Locality Taluka/sub-Division Town/City/District MATHURA MATHURA MATHURA MATHURA  Pin Coc State/Union Territory UTTAR PRADESH  128100  Telephone No.(STD Code & Tel. No.) Telephone No.(STD Code	Flat/Door/Block No.	KHATRI DHARMSALA, GENERAL GANJ	
Area/Locality Taluka/sub-Division  Town/City/District  MATHURA  MATHURA  MATHURA  Pin Coc  State/Union Territory UTTAR PRADESH  Pin Coc  State/Union Territory UTTAR PRADESH  e-mail ID  (a) CARAHULGARGG@GMAIL.COM  (b)  3. Nationality of Deductor (Tick the appropriate entry) Indian  Foreign  4. Permanent Account Number (PAN)  5. Existing Tax Deduction Account Number (TCN), if any  6. Existing Tax Collection Account Number (TCN), if any  7. Date (DD-MM-YYYY)  Verification  Verification  Verification  Verification  Verification  Verification	Name of Premises/Building/Village		
Town/City/District  MATHURA MATHURA  Pin Coc State/Union Territory UTTAR PRADESH  128100  Telephone No.(STD Code & Tel. No.)  e-mail ID  (a) CARAHULGARGG@GMAIL.COM  3. Nationality of Deductor (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)  Verification  Verification  Verification  Verification  Verification  Tax Model GUPTA  In *my/our capacity as PARTNER do hereby declare that what is stated above is true to the best of my/our convolvedge and belief.	Road/Street/Lane/Post Office	26	
State/Union Territory UTTAR PRADESH 28100  Telephone No.(STD Code & Tel. No.) 37201087174  e-mail ID (a) CARAHULGARGG@GMAIL.COM  (b) 6  3. Nationality of Deductor (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)  Verification  Verification  Verification  Verification	Area/Locality Taluka/sub-Division	MATHURA	
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knowledge and belief.	# E_ E_	Verification	
Peritied foday. The Too 1705 172022		spacity as PARTNER do hereby declare that what is stated above is true to the best of m	y/our*

Signature/Left Thumb Impression of