

Form No. 27A

Form for furnishing information with the statement of deduction / collection of tax at source (tick whichever is applicable) filed on computer media for the period Q3 (From 01/10/21 to 31/12/21 (dd/mm/yy)#)

1 (a) Tax Deduction Account No.	CHES46862E
(b) Permanent Account No.	AAXCS2554B
(c) Form No.	26Q

2 Particulars of the deductor / collector

(a) Name	SOLLU PRIVATE LIMITED
(b) Type of deductor*	COMPANY
(c) Branch / division (if any)	NIL
(d) Address	
Flat No.	1B
Name of the premises/building	NIRUPA PALACE
Road / street / lane	6TH AVENUE
Area / location	ANNA NAGAR
Town / City / District	CHENNAI
State	TAMILNADU
Pin code	600040
Telephone No.	44-45512252
E-mail	FATHIMA@SOLLU.IN

(d) Financial Year	2021-22
(e) Assessment year	2022-23
(f) Previous receipt number	NA
(In case return/statement has	
been filed earlier)	

3 Name of the person responsible for deduction / collection of tax

(a)Name	FATHIMA MOHAMMED BATCHA
b)PAN	AAFPF1129A
c)Address	
Flat No.	1B
Name of the premises/building	NIRUPA PALACE
Road / street / lane	6TH AVENUE
Area / location	ANNA NAGAR
Town / City / District	CHENNAI
State	TAMILNADU
Pin code	600040
Telephone No.	-
E-mail	FATHIMA@SOLLU.IN

4 Control totals

Sr. No.	Return Type (Regular / Correction type)	No. of deductee / party records	Amount paid (₹)	Tax deducted / collected (₹)	Tax deposited (Total challan amount) (₹)
1	REGULAR	1	1.00	.02	15000.00
Total		1	1.00	.02	15000.00

5	Fotal	Number	of A	Annexures	enc	losed
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6 Other Information

VERIFICATION

I, FATHIMA MOHAMMED BATCHA , hereby certify that all the particulars furnished above are correct and com-	ſ, <u>F</u> A	ATHIMA MOHAMMED BATCHA	_, hereby	certify	y that all	the pa	articulars	furnished	l above are	correct a	nd compl	ete.
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Place: CHENNAI Signature of person responsible for deducting / collecting tax at source

Date: 31/01/2022 Name and designation of person responsible for deducting / collecting tax at source FATHIMA MOHAMMED BATCHA, DIRECTOR

* Mention type of deductor - Government or Others

dd/mm/yy :- date/month/year