

### Investment Plan Submission Form for FY 2018 - 2019

### Form12BB(See rule 26C)

(Statement showing particulars of claims by an employee for deduction of tax under section 192)

# ZYCUS INFOTECH PRIVATE LIMITED



	For ADP Purpose Only			
		□ S & I	Date:	Sign:
Document Control No.		☐ Auditor	Date:	Sign:
I-662		□QC	Date:	Sign:
		□ ECC	Date:	Sign:
		☐ Process Admin	Date:	Sign:

—[ Employee Details ]—

Employee ID: 2687 PAN: ANEPV4424G

Employee Name: Tejas Vesvikar No of children studying: 0

Employee Address: 204 B, Harikrupa,1st natwar nagar, Jogeshwari east, Date of Joining: 02-Jan-2017

Mumbai 400060

Date Of Submission: 24-Jan-2019

Actual/Declaration	Month		Amount	City	Name	PAN	LandLordAdress
Actual	2018 APR	8333	Mumbai	Chandrakant	ABBP	V7306E	jogeshwari mumbai
Actual	2018 MAY	8333	Mumbai	Chandrakant	ABBP	V7306E	jogeshwari mumbai
Actual	2018 JUN	8333	Mumbai	Chandrakant	ABBP	V7306E	jogeshwari mumbai
Actual	2018 JUL	8333	Mumbai	Chandrakant	ABBP	V7306E	jogeshwari mumbai
Actual	2018 AUG	8333	Mumbai	Chandrakant	ABBP	V7306E	jogeshwari mumbai
Actual	2018 SEP	8333	Mumbai	Chandrakant	ABBP	V7306E	jogeshwari mumbai
Actual	2018 OCT	8333	Mumbai	Chandrakant	ABBP	V7306E	jogeshwari mumbai
Actual	2018 NOV	8333	Mumbai	Chandrakant	ABBP	V7306E	jogeshwari mumbai
Actual	2018 DEC	8333	Mumbai	Chandrakant	ABBP	V7306E	jogeshwari mumbai
Actual	2019 JAN	8333	Mumbai	Chandrakant	ABBP	V7306E	jogeshwari mumbai
Actual	2019 FEB	8333	Mumbai	Chandrakant	ABBP	V7306E	jogeshwari mumbai
Actual	2019 MAR	8333	Mumbai	Chandrakant	ABBP	V7306E	jogeshwari mumbai

**Total:** 99996

File Name	Uploaded On
2687_HRA_1.pc	If Thu 24-Jan-2019, 03:09:00 PM

## LIFE INSURANCE POLICIES

S.No	Actual/ Declaration	Beneficiary Relationship	Policy Doc/Ref No	Amount	
1	Actual	Self	5016111196	17612	I will not terminate the Insurance contract within two years of it's commencement. In the event of termination, I agree to pay the entire tax liability for the period and revise my tax return immediately.
2	Actual	Self	5014775018	30369	I will not terminate the Insurance contract within two years of it's commencement. In the event of termination, I agree to pay the entire tax liability for the period and revise my tax return immediately.
3	Actual	Self	17233588	33950	I will not terminate the Insurance contract within two years of it's commencement. In the event of termination, I agree to pay the entire tax liability for the period and revise my tax return immediately.
4	Actual	Self	260430384	30675	I will not terminate the Insurance contract within two years of it's commencement. In the event of termination, I agree to pay the entire tax liability for the period and revise my tax return immediately.
5	Actual	Self	5016997487	14999	I will not terminate the Insurance contract within two years of it's commencement. In the event of termination, I agree to pay the entire tax liability for the period and revise my tax return immediately.

**Total:** 127605

File Name	Uploaded On
2687_LifeInsurancePolicies_1.pdf	Thu 24-Jan-2019, 03:16:00 PM
2687_LifeInsurancePolicies_2.pdf	`Thu 24-Jan-2019, 03:16:00 PM
2687_LifeInsurancePolicies_3.pdf	Thu 24-Jan-2019, 03:16:00 PM
2687_LifeInsurancePolicies_4.pdf	Thu 24-Jan-2019, 03:17:00 PM
2687 LifeInsurancePolicies 5.pdf	Thu 24-Jan-2019, 03:17:00 PM

S.No	Actual/ Declaration	Beneficiary Relationship	Policy Doc/Ref No	Amount	
1	Actual	Self	14190104	10000	I will not terminate participation in ELSS and Mutual fund within three years of it's commencement. In the event of termination, I agree to pay the entire tax liability for the period and revise my tax return immediately.
2	Actual	Self	12266373	15000	I will not terminate participation in ELSS and Mutual fund within three years of it's commencement. In the event of termination, I agree to pay the entire tax liability for the period and revise my tax return immediately.

**Total: 25000** 

File Name	Uploaded On
2687_EquityLinkedSavingScheme_1.pdf	Thu 24-Jan-2019, 03:19:00 PM
2687_EquityLinkedSavingScheme_2.PDF	Thu 24-Jan-2019, 03:21:00 PM
2687_EquityLinkedSavingScheme_3.PDF	Thu 24-Jan-2019, 03:22:00 PM
2687_EquityLinkedSavingScheme_4.pdf	Thu 24-Jan-2019, 03:22:00 PM

### **DECLARATION:**

Employee Name:

PAN:

🗹 I, Tejas Vesvikar, son/daughter of **Chandrakant G. Vesvikar**, do hereby certify that the information given above is complete and correct.

- The amount of investments/Payments referred above is / will be paid out of The income earned during the FY 2018- 2019 chargeable to tax.
- The information provided by me above is true and correct. I also undertake to indemnify the Company from any loss / Liability that may arise in the event of the above Information being incorrect

: Tejas Vesvikar

: ANEPV4424G

Place:		
Designation:		
Signature(This is a computer generated form, h	nence signature is not required)	
Date	: 24-Jan-2019	
Employee ID:	: 2687	

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