

FORM NO. 15G

[See section 197A(1C), 197A(1A) and rule 29C]

Declaration under section 197A(1) and section 197A (1A) of the Income-tax Act, 1961 to be made by an individual or Person (not being a company or firm) claiming certain receipts without deduction of tax.

PART - I

1] Name of Assessee (Declarant): HARIKRISHNAN P		2] PAN: AHAPH8515L			
		3] Assessment Year: 2020-21			
		6] Status: Resident			
4] Flat / Door / Block No.: No 107	5] Name of Premises:	7] Assessed in which Ward / Circle			
8] Road / Street / Lane: Albagadur Sasthi Street 8M Block	9] Area / Locality: Jaferkhan pet	10] AO Code (whom assessed last time):			
11] Town / City / District: Chennai	12] State: Tamil Nadu	Area Code	AO Type	Range Code	AO No.
	13] PIN 600083	14] Last Assessment Year in which assessed :			
15] Email : harikrishnanp88@gmail.com	16] Telephone / Mobile No: 8148015090	17] Present Ward / Circle			
		18] Residential Status: Resident			
19] Name of Business / Occupation:		20] Present AO Code (if not same as above):			
21] Jurisdictional Chief Comm. of Income Tax or Comm. of Income Tax (if not assessed to income tax earlier):		Area Code	AO Type	Range Code	AO No.
22] Estimated total income from the sources mentioned below: <i>(Please tick the relevant box)</i>					
Dividend from shares referred to in Schedule - I					
Interest on securities referred to in Schedule - II					
Interest on sums referred to in Schedule - III					
Income from units referred to in Schedule - IV					
The amt of withdrawal referred in sec-80CCA(2)(a) from National Savings Scheme referred to in Schedule - V					
23] Estimated total income of the previous year in income mentioned in Col - 22 to be included :					
24] Details of investments in respect of which the declaration is being made :					

SCHEDULE-I

(Details of shares, which stand in the name of the declarant and beneficially owned by him)

No. of Shares	Class shares & face value of each share	Total value of shares	Distinctive numbers of the shares	Date on which the shares were acquired by the declarant (dd/mm/yyyy)

SCHEDULE-II

(Details of the securities held in the name of declarant and beneficially owned by him)

Description of securities	Number of securities	Amount of securities	Date(s) of securities (dd/mm/yyyy)	Date(s) on which the securities were acquired by declarant(dd/mm/yyyy)

SCHEDULE-III

(Details of the sums given by the declarant on interest)

Name and address of the person to whom the sums are given on interest	Amount of sums given on interest	Date on which sums given on interest (dd/mm/yyyy)	Period for which sums were given on interest	Rate of interest

SCHEDULE-IV
(Details of the mutual fund units held in the name of declarant and beneficially owned by him)

Name and address of the mutual fund	Number of units	Class of units and face value of each unit	Distinctive number of units	Income in respect of units

SCHEDULE-V
(Details of the withdrawal made from National Savings Scheme)

Particulars of the Post Office where the account under the National Savings Scheme is maintained and the account number	Date on Which the account was open (dd/mmm/yyyy)	The amount of withdrawal from the account

x P. Hari Krishnan
Signature of the Declarant

Declaration / Verification

*I/ We Hari Krishnan. P do hereby declare that to the best of Knowledge and belief what is stated above is correct, complete and truly stated. *I /We declare that incomes referred to in this form are not includable in the total income of any other person u/s 60 to 64 of Income Tax Act, 1961. *I/We further, declare that tax *on my / our estimated total income, including *income / incomes referred to in column 22 above, computed in accordance with provisions of the Income Tax Act 1961. for the previous year ending on 31st March 2020 relevant to the Assessment year 2020-21 will be nil.
*I / We also, declare that *my / our *income / incomes referred to in Column 22 for the previous year ending on 31st March 2020 relevant to the Assessment year 2020-21 will not exceed the maximum amount which is not chargeable to income tax.

Place :
Date :

x P. Hari Krishnan
Signature of the Declarant

PART – II

[For use by the person to whom the declaration is furnished

1] Name of the person responsible for paying the income referred to in Column 22 of Part I : HINDUSTAN INSTRUMENTS LTD. EPF TRUST		2] PAN of the person indicated in Column 1 of Part II AAATH2918N	
3] Complete Address: 806,SIDDHARTH, 96 NEHRU PLACE, NEW DELHI- 110019		4] TAN of the person indicated in Column 1 of Part II : DELH03594D	
5] Email :	6] Telephone / Mobile No :	7] Status :	
8] Date on which Declaration is Furnished (dd/mm/yyyy) :	9] Period in respect of which the dividend has been declared or the income has been paid / credited :	10] Amount of income paid :	11] Date on which the income has been paid / credited (dd/mm/yyyy) :
12] Date of declaration, distribution or payment of dividend/withdrawal under the National Savings Scheme(dd/mm/yyyy) :	13] Account Number of National Saving Scheme from which withdrawal has been made : GN/GGN/5572/		

Forwarded to the Chief Commissioner or Commissioner of Income-tax _____
Place: _____
Date: _____

Signature of the person responsible for paying the income referred to in Column 21 of Part I

Request No. : REQ-48927

Employee Id : 51629650
Mobile No. : 8148015090
Email-Id : harikrishnanp88@gmail.com

EMPLOYEES' PROVIDENT FUND ORGANIZATION
COMPOSITE CLAIM FORM (NON-AADHAAR)

- 1) Claims Applied for **I**) Final PF Settlement (✓) **II**) Pension Withdrawal Benefits ()
- 2) Name of the member (In Capital Letters) : **HARIKRISHNAN P**
- 3) a) Universal Account Number (UAN) : **100923816847**
b) PF Account No. : **GN/GGN/005572/0000353742**
- 4) Name and address of the Factory /Establishment in which the member was last employed : **HCL Technologies Limited
Plot No. 3, Udyog Vihar,
Phase-1, Gurugram - 122 016**
- 5) Aadhaar No./Aadhaar Enrollment No. : **924091671064**
- 6) Father's Name/Husband's Name : **PARAMASIVAM A**
- 7) Date of Birth : **15-May-1989**
- 8) Date of Joining the establishment : **12-Sep-2016**
- 9) Date of leaving service : **22-Mar-2019**
- 10) Permanent Account No. (PAN) : **AHAPH8515L**
- 11) Reason for leaving service : **Resignation**
- 12) Bank Account details for Payment : **S.B. Account No.: 50100176581841
Name of the Bank: HDFC
Branch: DLF BRANCH CHENNAI
Full address of the Branch: DLF BRANCH CHENNAI
IFSC Code: HDFC0001869**
- 13) Full Postal Address : **NO 107, LALBAGADUR SASTHRI STREET, SM BLOCK,
JAFERKHAN PET, CHENNAI-600083**

CERTIFIED THAT THE PARTICULARS ARE TRUE TO THE BEST OF MY KNOWLEDGE

- The member hereby declares that he/she has not been employed in any factory/establishment to which the Act applies for continuous period of not less than 2 months immediately preceding the date of my application for final withdrawal of my provident fund money.
- Certified that the particulars are true to the best of my knowledge.

Date : **27. 05. 2019**



Signature or Left hand thumb

Impression of the member

Signature of the employer or Authorised official

Request No. : REQ-48927

Employee Id : 51629650
Mobile No. : 8148015090
Email-Id : harikrishnanp8@gmail.com

EMPLOYEES' PROVIDENT FUND ORGANIZATION
COMPOSITE CLAIM FORM (NON-AADHAAR)

- 1) Claims Applied for **I** Final PF Settlement () **II** Pension Withdrawal Benefits (✓)
2) Name of the member (In Capital Letters) : **HARIKRISHNAN P**
3) a) Universal Account Number (UAN) : **100923816847**
b) Pension Account No. : **GN/GGN/005572/340617**
4) Name and address of the Factory /Establishment in which the member was last employed : **HCL Technologies Limited
Plot No. 3, Udyog Vihar,
Phase-1, Gurugram - 122 016**
5) Aadhaar No./Aadhaar Enrollment No. : **924091671064**
6) Father's Name/Husband's Name : **PARAMASIVAM A**
7) Date of Birth : **15-May-1989**
8) Date of Joining the establishment : **12-Sep-2016**
9) Date of leaving service : **22-Mar-2019**
10) Permanent Account No. (PAN) : **AHAPH8515L**
11) Reason for leaving service : **Resignation**
12) Are you willing to accept Scheme Certificate in lieu of withdrawal benefits : **NO**
13) Particulars of Family

Family member(s) / Nominee	Name	D.O.B	Relationship with member	Name of the Guardian for minor
Member-1	Yogarajan	26-Jun-1991	Brother	
Member-2				
Member-3				
Nominee				

- 14) Bank Account details for Payment : S.B. Account No.: **50100176581841**
Name of the Bank: **HDFC**
Branch: **DLF BRANCH CHENNAI**
Full address of the Branch: **DLF BRANCH CHENNAI**
IFSC Code: **HDFC0001869**
- 15) Full Postal Address : **NO 107, LALBAGADUR SASTHRI STREET, SM BLOCK,
JAFERKHAN PET, CHENNAI-600083**

➤ Certified that the particulars are true to the best of my knowledge.

Date : **27. 05. 2019**


Signature or Left hand thumb

Impression of the member

Signature of the employer or Authorised official

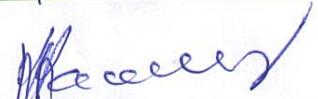
Employee Number _____

RENT RECEIPT

(All details are mandatory)

Received from (Employee Name)	HARIKRISHNAN. P
Rent (excluding maintenance) per month	₹ 11,000
Maintenance amount per month	₹ 500
Month & Year for which Rent is paid	April 2019
Address of the Property where Employee is Residing (Complete Address)	No 107, A1, Lalbagaden Sasthi Street, SM Block, Jaferkhanpet, Chennai - 600083
Residing from (Month & Year)	September 2015

DETAILS OF LANDLORD/LADY (OWNER)

Name of the Landlord/Lady	RAMAMOORTHY , R
Address (Complete Address)	No 107, Lalbagaden Sasthi Street SM Block, Jaferkhanpet, Chennai - 600083
PAN of the Owner # (In case Land owner does not have a PAN, please submit a declaration)	DATPR0950Q
Contact Details:	044 - 24740419
Date : 05/05/2019	
Place : Chennai	 (Owner's Signature)

Owner's Permanent Account Number (PAN) is mandatory if the rent is more than ₹ 1,00,000 per annum (₹ 8,333 per month)

Declaration by the employee:

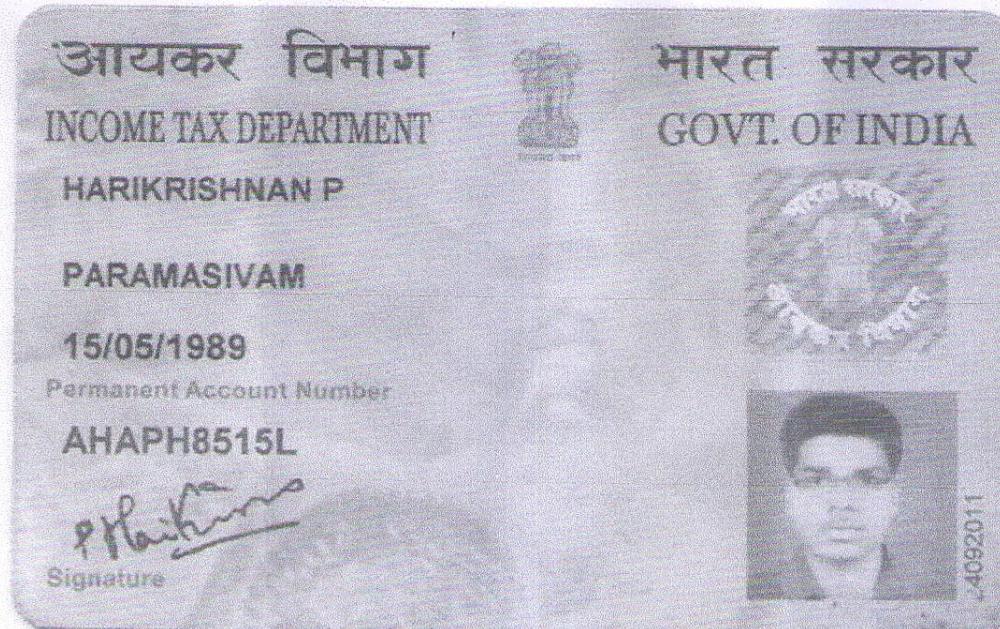
I, HariKrishnan. P do hereby declare that what is stated above is true to the best of my knowledge and belief.

I also agree to inform Infosys if there is any change in the rent paid, location, period of residence or any other information which are relevant in computing my House Rent Exemption.

Employee's signature: P. HariKrishnan

Date: 05/05/2019

Place: Chennai



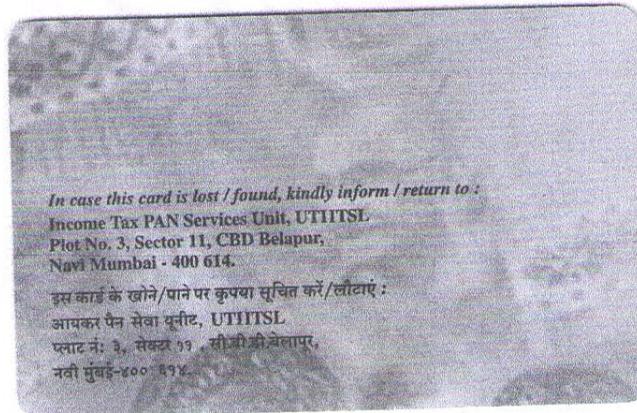
इस कार्ड को खोने / पाने पर कृपया सूचित करें / लौटाएँ:
 आयकर पैन सेवा इकाई, एन एस डी एल
 तीसरी मज़ील, सफ़ेदर चैम्बर्स,
 बानेर टेलिफोन एक्सचेंज के नजदीक,
 बानेर, पुन्हा - 411045

If this card is lost / someone's lost card is found,
 please inform / return to:

Income Tax PAN Services Unit, NSDL
 3rd Floor, Sapphire Chambers,
 Near Baner Telephone Exchange,
 Baner, Pune - 411 045

Tel: 91-20-2721 8080, Fax: 91-20-2721 8081
 e-mail: tininfo@nsdl.co.in

P. Hari Krishnan



Phoebe