

"FORM NO. 15G

[See section 197A(1), 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 a person (not being a company or firm) claiming certain Incomes without deduction of tax.

PART-I

1. Name of Assessee (Declarant) SANDESH . S.		2. PAN of the Assessee ¹ BQVPS9832E.	
3. Status ² SINGLE / MALE.		4. Previous year (P.Y.) ³ (for which declaration is being made)	
5. Residential Status ⁴			
6. Flat/Door/Block No. # 1743	7. Name of Premises RASAJINAGAR	8. Road/Street/Lane 6TH MAIN, 2ND STAGE	9. Area/Locality AR. D-BLOCK, RASAJINAG
10. Town/City/District BANGALORE	11. State KARNATAKA	12. PIN 560010.	13. Email sandesh8816@gmail.com
14. Telephone No. (with STD Code) and Mobile No. 9916324908		15. (a) Whether assessed to tax under the Income-tax Act, 1961 ⁵ : (b) If yes, latest assessment year for which assessed Yes <input type="checkbox"/> No <input type="checkbox"/>	
16. Estimated income for which this declaration is made <		17. Estimated total income of the P.Y. in which income mentioned in column 16 to be included ⁶	
18. Details of Form No. 15G other than this form filed during the previous year, if any?			
Total no. of Form No. 15G filed		Aggregate amount of income for which Form No. 15G filed	
19. Details of income for which the declaration is filed			
Sl. No.	Identification number of relevant investment/account, etc. ⁸	Nature of income	Section under which tax is deductible

Sandesh.S.

Signature of the Declarant⁹

Declaration/Verification¹⁰

*I/We **SANDESH . S.** do hereby declare that to the best of *my/our knowledge and belief what is stated above is correct, complete and is truly stated. *I/We declare that the incomes referred to in this form are not includible in the total income of any other person under sections 60 to 64 of the Income-tax Act, 1961. *I/We further declare that the tax *on my/our estimated total income including *income/incomes referred to in column 16 *and aggregate amount of *income/incomes referred to in column 18 computed in accordance with the provisions of the Income-tax Act, 1961, for the previous year ending on.....relevant to the assessment year.....will be nil. *I/We also declare that *my/our *income/incomes referred to in column 16 *and the aggregate amount of *income/incomes referred to in column 18 for the previous year ending on.....relevant to the assessment year.....will not exceed the maximum amount which is not chargeable to income-tax.

Place: **BANGALORE.**

Date: **05-11-2017.**

Sandesh.S.

Signature of the Declarant⁹

PART II

(To be filed by the person responsible for paying the income referred to in column 16 of Part I)

1. Name of the person responsible for paying Assistant Provident Fund Commissioner		2. Unique Identification No. ¹¹	
3. PAN of the person responsible for paying	4. Complete Address: Employees' PF Orgn. Sub-Regional Office, Bommasandra, 6th Main Singasandra, Hosur Road, Bangalore-560068	5. TAN of the person responsible for paying BLREO3625G	
6. Email sro.bms@epfindia.com	7. Telephone No. (with STD Code) and Mobile No. 080-25734590, 25734492	8. Amount of income Paid	
9. Date on which Declaration is received (DD/MM/YYYY)		10. Date of which the income has been paid/credited (DD/MM/YYYY)	

Place:

Date:

Signature of the person responsible for paying