## Form No. 49B

[See section 203A and rule 114A]
Form of application for allotment of Tax Deduction and Collection Account Number

	nder Section 203A of the Income Tax Act, 1961	
То,		
Assessing Officer (TDS / TCS)		
[		
Assessing Officer Code (TDS / TCS) Area code		
AO Type		
Range Code		
AO Number		
Sir,		
Whereas *I/we *am/are liable to *deduct/collect at source' or 'BBCollection at source' of the Ir	or deduct tax and collect tax in accordance with Chapter XVII under the heading *'B. – Deduction noome-tax Act, 1961;	
Number has been allotted to *me/us;	er/Tax Collection Account Number or Tax Deduction Account Number and Tax Collection Account	
*I/We give below the necessary particulars:	Aform 1	
Please refer to instructions before filling up the		
1 Name - (Fill only one of the columns 'a' to 'h (a) Central / State Government:	', whichever is applicable.)	
	Central Government State Government Local Authority (Central Govt.)	
Tick the appropriate entry		
	Local Authority (State Govt.)	
Name of Office	Mukul Moondra	
Name of Organisation	Moon Soft Technologies Pv	t
		•
Name of Department	M u k u l	
Name of Ministry	Mukul Moondra899	
Name of Ministry	M  u  k  u  1   M  o  o  n  d  r  a  8  9  9	
Designation of the person responsible	Mukul Moondra vj	
for * making payment / collecting tax		
(b) Statutory / Autonomous Bodies :		
Tick the appropriate entry	Statutory Body Autonomous Body	
Name of Office		
Name of Office		
Name of Organisation		
Designation of the person responsible		

for \* making payment / collecting tax

Company (See Note 1):																									
Tick the appropriate entry	Government Company/Corporation Government Company/Corporation Other established by a Central Act established by a State Act Com																								
Title (M/s) (tick if applicable)															у										
Name of Company																		l			$\overline{}$	П	$\neg$		
,	$\vdash$		l	I 	l							 	l							-	$\Box$	_	_	$\Box$	$\dashv$
			I			_														_	$\Box$	_	<u></u>	$\Box$	ᆜ
Desire of the control of the			1		1								1			l		l		_	Ш	_	_	$\Box$	ᆜ
Designation of the person responsible for * making payment / collecting tax																					Ш			Ш	ᆜ
																							<u> </u>	Ш	
(d) Branch/Division of a Company:											_														
Tick the appropriate entry	established by a Central Act established by a State Act Company  (tick if applicable)														_										
Title (M/s) (tick if applicable)																									
Name of Company																									
	Г																						Γ		$\neg$
	$\overline{\Box}$																								$\overline{}$
Name of Division	$\vdash$														<u> </u>					$\equiv$			$\equiv$	П	$\exists$
																			l	$\vdash$		_	_	П	$\dashv$
		l			l			l					l		l				l	Ш		_			_
Name / apation of Branch				<u> </u>								<u> </u>			<u>                                     </u>				<u> </u> 	Ш		_			닉
Name/Location of Branch																				Ш	$\square$	_			ᆜ
Designation of the person responsible for * making payment / collecting tax																				$\sqsubseteq$	Ш	_		Щ	_
(e) Individual / Hindu Undivided Family (K	arta)	- (5	See	Not	e 2)	:																			
Tick the appropriate entry	Indi	vidu	al [			Н	indu	ı Un	divid	ded	Fan	nily													
Title (tick the appropriate entry for individ	ual)			Shr	i				Sm	ıt.				K	uma	ri [									
Last Name / Surname																									
First Name																									
Middle Name																									
(f) Branch of Individual Business (Sole pr	oprie	tors	hip	cor	ncer	n)/	Hind	du L	Jndi	vide	ed F	am	ilv (	Kar	ta)										
Tick the appropriate entry		nch											nch d			Un	divid	ded	Fan	nily [			1		
Individual/ Hindu Undivided Family (Karta								,												٠, ١			1		
Title (tick the appropriate entry for individ	ual)			Shri					Sm	ıt. [				Kı	uma	ri 🗌									
Last Name / Surname													$\neg$												
First Name												 										_			_
Middle Name		 			 							 	 		 				 						_
	_																		l	Ш		_			ᆜ
Name/Location of branch				<u> </u>	<u> </u>							<u> </u>	<u> </u>		<u> </u>				<u> </u>		Ш				
(g) Firm / Association of Persons / Associ	ation	of I	Pers	son	s (T	rust	s) /	Boo	dy o	f In	divi	dua	ls /	Arti	ficia	al Ju	ırid	ical	Per	son	(Se	e N	lote	3):	
Name	L															<u> </u>			<u> </u>	<u> </u>	<u>Ш</u>		<u> </u>	$\bigsqcup_{-}$	
																				Π			Τ		$\neg$

	(h) Branch of Firm / Association of Person	ns / A	SS	ocia	tion	of	Per	rson	s (T	rus	sts) .	/ Bo	dy	of Ir	ndiv	idι	uals	<b>;</b> / .	Arti	fici	al J	Juri	dica	al P	erso	n:		
	Name of Firm / Association of Persons / A	Assoc	ciati	on o	f Pe	ersor	ns (	Trus	sts) /	/ Bo	ody (	of In	divi	dual	s / /	٩rti	ficia	al J	uric	lical	l Pe	rso	n:					
																					$\prod$	$\mathbb{L}$	$\perp$	$\perp$	$\perp$	I		
																						floor		$\perp$		$\mathbb{I}$	I	
																						$\perp$	$\mathbb{L}$	$\perp$	$\Box$	Ι	Ι	
	Name/Location of branch																					I	Ι	I		I	Ι	
2	Address																											
	Flat / Door / Block No.																					I	$\perp$			Ι		
	Name of Premises / Building / Village	M	u	k	u	1		M	О	С	n	d	r	а								I	$\perp$			Ι		
	Road / Street / Lane / Post Office	2	2	,		S	h	r	i	р	а	1		N	l a	1 8	g	a	r			I	Ι	I		Ι	Ι	
	Area / Locality / Taluka / Sub-Division																					I	I	$\Box$		I	$\perp$	
	Town / City / District	S	U	М	Ε	R	Р	U	R													I	I	$\Box$		Ι	$\perp$	
	State / Union Territory	R	а	ј	а	S	t	h	а	n			Γ		Ι							I	Ι	$\perp$	$\perp$	Ι	Ι	
	PIN code	3	0	6	9	0	2																					
	Telephone No.	STE	ОС	ode	0	2	9	3	3			Ph	one	No.	8	8	3 2	2	4	5	0	3	8	8	8			
	e-mail IDs a)	m	u	k	u	t	h	е	С	0	О	1	@	g	m	а	į	-	l		¢	ф	m	Ι	I	Ι	Ι	
																							$\perp$	Ι	I	Ι	Ι	
	b)	m	u	k	u	t	h	е	С	О	О	1	@	g	m	а	į		l		¢	φ	m	Ι	工	Ι	I	
																	Τ						I	$\perp$		Ι	I	
3	Nationality of Deductor (Tick the appropri	ate e	ntṛ	y)																								
	Indian																											
	Foreign																											
4	Permanent Account Number (PAN) - (spec	ify wi	here	ever	арр	lica	ble)	)																				
5	Existing Tax Deduction Account Number	(if an	(v)																									
J	Existing Tax Deduction Account Number		,, 	_																								
6	Existing Tax Collection Account Number	if any	v)	1																								
7	Date (DD-MM-YYYY)																	Г									7	
						٧	eri	fica	tior	1										Sig	jne	d (	App	olica	ınt)			
*1	00/-	1			L							-1		1			1		l 4									
	/We, in my the best of my/our knowledge and belief		cap	Jaci	іу а	S	••••					d	υn	erek	уу (	aec	iar	e t	nat	wr	ıat	IS S	siat	₽Œ	apo	ve	ıs t	rue
۱/	erified today the		1	7																								
٧	d d mm y y	/ y	у	J																								
	at															 ft	 Thi		 b l			sio		 f Δι	 oplic	aní		
N	otes :		••••									(0)	9110	iuit	,, LC	,1 L		at I I	J I	יוףו		JIUI	ال ،	Δ,	, Pilo	arıl	,	

- 1 This column is applicable only if a single TAN is applied for the whole company. If separate TANs are applied for different divisions/branches, please fill details in (d).
- 2 For branch of Individual business/Hindu Undivided Family, please fill details in (f).
- 3 For branch of firm/Association Of Persons/Association Of Persons (Trust) / Body Of Individuals/Artificial Juridical Person, please fill details in (h).
- \* Delete whichever is inapplicable.