## Form for Changes or Correction in TAN data for TAN allotted under Section 203A of the Income Tax Act, 1961

Tax Deduction Account	lo. (TAN)		$\top \top \top$	$\Box\Box$
-----------------------	-----------	--	------------------	------------

1	Са	tegory of Deductor																										
	Tic	k the appropriate category:																										
	a)	Central Government / State Government	ent ,	/ Lo	cal /	Auth	nority	y																		$\exists$		
	b)	Statutory / Autonomous Bodies																								Ī		
	c)	Company																								$\bar{\exists}$		
	d)	Branch of a Company																						ŝ		Ī		
	e)	Individual / Hindu Undivided Family (I	Karta	a)																						Ī		
	f)	Branch of Individual Business (Sole p	ropr	ieto	rship	0 00	nce	rn)/	Hind	Ju U	Indiv	/ided	d Fa	ımily	/ (Ka	arta)	)									$\bar{\exists}$		
	g)	Firm / Association of Persons / Association	iatio	n of	Pe	rsor	ns (T	rust	s) /	Bod	y of	Ind	ividı	uals	/ Ar	tifici	al Jı	urid	ical	Per	son					$\bar{\exists}$		
	h)	h) Branch of Firm / Association of Persons / Association of Persons (Trusts) / Body of Individuals / Artificial Juridical Person																										
2	Na	me - (Fill only one of the columns 'a' t	o 'h'	, wh	iche	ever	is a	ppli	cabl	e.)																		
	(a) Central / State Government:																											
		Tick the appropriate category Central Government State Government Local Authority (Central Govt.)																										
	Local Authority (State Govt.)																											
		Name of Office																										
		Name of Organisation																										
			$\equiv$				Т	П			Г												Г	Г	Т	$\overline{}$		
			$\equiv$			Η																		H		$\vdash$		
		Name of Department																								$\vdash$		
		Traine of Beparation		 			_	_		 	_	_			_	l	_				I		_		_	_		
				_		_	_	_				_			_	 			1			 	_	_	_	느		
																									_	느		
		Name of Ministry																										
		Designation of the person																										
		responsible for making the payment																										
	(b)	Statutory / Autonomous Bodies :																										
		Tick the appropriate category	Sta	tuto	уΒ	ody			,	Auto	non	nous	Во	dy														
		Name of Office																										
		Name of Organisation				Ι	T																					
						Ī	T				_			_											Ī	$\overline{}$		
											_			_								_				$\equiv$		
		Designation of the person		_		_	_	_			_	_	_	_	_	 				_		_	_	_	_	_		V.1.0.
		Designation of the person														<u> </u>		<u> </u>	1		<u> </u>	<u> </u>	1	L				>

	responsible for making the payment																													
(c)	Company: [This column is applicable	only	if 7	TAN	is a	llott	ed t	o a	com	pan	y as	s a v	vhol	e. If	sep	ara	te T	AN .	is aj	oplie	ed fc	or dii	ffere	ent						
	divisions/branches, please fill details i	in (d)	'Br	anci	h/Di	visio	оп о	f a (	Com	pan	y' o	nly]																		
	Tick the appropriate category										Government Company/Corporation Other																			
		established under a Central Act									est	ablis	shec	d un	der	a St	ate	Act				Company								
	Title (M/s) tick if applicable																													
	Name of Company																													
																									П	$\neg$				
	Designation of the person responsible																													
	for making the payment																													
(d)	Branch/Division of a Company:																													
		Gov	erni	men	t Co	mpa	any/	Cor	pora	ation		7	Gov	ern:	men	t Co	gmo	any/	(Cor	pora	ation	· [	$\neg$	Oth	er	$\neg$				
		esta																a St				_	_		npan	 1V				
	Title (M/s) tick if applicable																									•				
	Name of Company				Г				Г		Г			Г					Г		Г				П	$\neg$				
		$\equiv$												$\equiv$						$\equiv$	$\equiv$	$\equiv$	$\equiv$	_	$\Box$	二				
		_		_	_	_	_	_	_	_	_	_		_		_			_	$\vdash$	$\vdash$	$\sqsubseteq$	$\vdash$		$\Box$	_				
											_								_	느	느	$\sqsubseteq$	느		ᆜ	ᆜ				
	Name of Division			_	L	_	L			L		<u> </u>	Ш	<u> </u>			_		<u> </u>	Ш		Ш		Ш	Ц	$\Box$				
	Name/Location of Branch																													
	Designation of the person responsible																													
	for making the payment																													
(e)	Individual / Hindu Undivided Family	/ (Ka	ırta)	- [f	or b	rano	ch o	f Ind	divia	lual .	/ HL	JF. J	olea	se fi	ill de	etails	s in	(f) a	nly)	,										
		Indiv		_									l Fa				7	.,												
	Title (tick the appropriate entry for ind	lividu	ıal)	_		 Sh	ıri 🗌				Sr	nt. [				k	_ (um	ari												
	Last Name / Surname																													
	First Name																													
	Middle Name																													
(f)	Branch of Individual Business (Sole	pro	prie	etor	ship	o co	nce	rn)/	Hir	ıdu	Unc	livio	led	Fan	nily	(Ka	rta)													
	Tick the appropriate category	Brar	nch	of Ir	ndivi	dua	bu	sine	SS					Bra	nch	of H	lind	u Uı	ndiv	ided	l Far	mily			]					
	Individual/ Hindu Undivided Family (K	arta)	:																											
	Title (tick the appropriate entry for ind	lividu	ıal)			Shi	ri [				Sr	nt. [				K	(um	ari [												
	Last Name / Surname																													
	First Name																													
	Middle Name			L				L	L	L																				
	Name/Location of branch																									$\overline{}$				

	(g) Firm / Association of Persons /	Associa	atio	n of	Pe	rsoı	ns (	Trus	sts)	/ B	ody	of I	ndi	/idu	als	/Ar	tific	ial	Juri	dica	l Pe	erso	n:			
	[for branch of firm / AOP / AOP (Trust) / BOI / Artificial Juridical Person, please fill details in (h) only]																									
			Γ	Γ								Π	Π													
																						$\overline{}$				
	(h) Branch of Firm / Association of	Person	s/	Ass	ocia	atio	n of	Per	rson	ıs (	Trus	sts)	/ Bo	odv	of li	ndiv	ridu	als	/ Ar	tifici	ial J	Juric	dica	l Pe	rso	n:
	Name of Firm / Association of Per											-		-												
				Π								, 														
			 									_	_	 								$\equiv$				
				$\overline{\Gamma}$																		$\equiv$				
	Name/Location of branch								Г				_													
_	3 Address	<u>-</u>	_		_		•	_	•	_				_	_			_					_			
	Flat / Door / Block No.			Г																		$\overline{}$				
	Name of Premises / Building		l		 								 		 			l								
	Road / Street / Lane		 	_								_		_								$\vdash$				一
	Area / Locality																					$\vdash$				_
	Town / City / District						_	l						l	l		I					$\vdash$				$\equiv$
						_												_	_			$\vdash$		_		_
	State / Union Territory							<u> </u>																		
	PIN code	L	L	L				]		_	_							_					_	_		
	Tel. No.	STE	) Co	ode								Pho	one	No.								$\perp$				
	e-mail IDs a)																									
	b)																									
	4 Nationality of Deductor (Tick the a	ppropria	ate	cate	gor	y)																				
	Indian																									
	Foreign																									
_	5 Permanent Account Number (PAN)	- (speci	ifv v	vher	eve	r apı	plica	ıble.	)																	
,						,		,																		
_	6 Mention other Tax Deduction Acco	ount Nur	nbe	r (T	AN/	s) a	llott	ed	to y	ou,	tha	t ne	ed 1	o b	e sı	ırre	nde	red	can	cell	ed					
	TAN 1		1			_	_	Т	AN	3	Г	T	Ť	Т		Т	Т	T	Т	_	1					
			_	_		_	_				_		_	_		<del> </del>	_	<del> </del>	<del> </del>	_	_					
	TAN 2								TAN	4	L															
						Ve	rific	cati	ion																	
144	/o	mulaur	00	nac	itre	20						لم	م <i>د</i>	امعما	hv.	do-	مرد	+6-	.+	/ha+	ic	c+c+	~~l	aha	wo.	ic
	e to the best of my/our knowledge a			pac	ity i	as	••••	••••			••••	u	O N	erei	uy (	iec	are	ul lá	al W	mal	15	sidl	eu	ab0	ve ]	3
Ve	rified today thisday of .			Y	⁄eaı	r			at																	

Signed (Applicant)