FORM NO.15-H [See Section 197-A(1C) and Rule 29-C Of the Income Tax Rules, 1962]						DECLARATION UNDER SECTION 197-A(1C) TO BE MADE BY AN INDIVIDUAL WHO IS OF THE AGE OF SIXTY YEAR OR MORE CLAIMING CERTAIN INCOMES WITHOUT DEDUCTION OF TAX.					
					PAF	RT -I					
1. Name of Assessee (Declarant)				2. PAN of the Assessee				3. Date of Birth (DD/MM/YYYY)			
Previous year (PY) (for which is being made)			ch declaration 5. Flat			t/Door/Block No.			6. Name of premises		
7. Road / Street /Lane		8. Area / Locality				9.Town / 0	City / Distric	t	10. State		
11. PIN		12. Email				13. Telephone No. (with STD code) and Mobile No.					
14. (a) Whether assessed to tax: (b) If Yes, Latest assessment year for Which assessed -											
15. Estimated income for which this declaration is r					mentioned in column 15 to be included						
	tails of form No .15H o										
Total N	lo of Form No 15H filed	t	Aggre	gate am	ount o	f income fo	r which For	m No. 1	5H filed		
10 Da	taile of income which th	ho doolo	rotion is	filed							
Sl. No	etails of income which the declaration lidentification number of relevant investigations.				Nature	e of income	Section under tax de		ductable	Amount of Income	
				-							
t 5 *	do hereby declare tha also hereby declare tha ruly stated and that inconsection 60 to 64 of Inconincome / incomes referrecomputed in accordance wassessment year	t to the bomes refeme Tax A ed to in continuous	est of notes to the second sec	ny knowl in this fo 1. I furtl 15* and a	edge a orm are her dec aggrega	nd belief when includible includible includible includible including the including the including the including including the including including including the including includi	nat is stated n the total i e tax on my of *income /	tion 6 of above is ncome of estimation	s correct, of any oth ted total i s referred	me Tax Act,1961. complete and is er person under income including to in column 17	
	Place : Date :							Signati	ure of D	eclarant	

PART-II

[To be filled by the person responsible for paying the income referred to the column 16 of part I]

1.Name of the person responsible for	or paying	2.Unique identification Number				
3. PAN of the person responsible for paying	4. Complete Add	ress	5.TAN of the person responsible for paying			
6. Email	7.Telephone No (Mobile No	(with STD code)	8. Amount of income paid			
9. Date on which declaration is rece (DD/MM/YYYY)	eived	10. Date on which the income is paid/credited (DD/MM/YYYY)				
Place:			ature of person responsible for paying			