

**FORM NO. 15H**

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

Declaration under section 197A(1C) to made by an individual who is of the age of sixty years or more claiming certain incomes without deduction of tax.

**PART - I**

1. Name of Assessee (Declarant)			2. PAN of the Assessee		
			3. Date of Brith (DD/MM/YY)		
4. Previous year (P.Y.) (for which declaration is being made			5. Flat / Door / Block No.		
6. Name of Premises		7. Road / Street / Lane		8. Area / Locality	
9. Town / City / District		10. State		11. PIN	
		Gujarat			
12. E-mail		13. Telephone No. (with STD Code) and Mobile No.			
14. (a) Whether assessed to tax			Yes	No.	
(b) If yes, latest assessment year for which assessed					
15. Estimated income for which this declaration is made					
16. Estimated total income of the P.Y. in which income mentioned in column 15 to be included					
17. Details of Form No. 15H other than this form filled for the previous year, if any					
Total No. of Form No. 15H filed			Aggregate amount of income for which Form No. 15H filed		
18. Details of income for which the declaration is filed					
Sr. No.	Identification number of relevant investment/account, etc.	Nature of Income	Section under which tax is deductible	Amount of Income	

\*\* Signature of the Declarant

### Declaration / Verification

\*I \_\_\_\_\_ do hereby declare that I am resident in India within the meaning of section 6 of the Income-tax Act, 1961. I also, hereby declare that to the best of my knowledge and belief what is stated above is correct, complete and is truly stated and that the incomes referred to in this form are not includible in the total income of any other person u/s 60 to 64 of the Income-tax Act, 1961. I further, declare, that the tax on my estimated total income, including income/income referred to in column 15 and aggregate amount of income/incomes referred to in column 17 computed in accordance with the provision of the Income-tax Act, 1961, for the previous year ending on \_\_\_\_\_ relevant to the assessment year \_\_\_\_\_ will be nil. \_\_\_\_\_

Place :

Date

\_\_\_\_\_  
\*\* Signature of the Declarant

### PART - II

[To be filled by the person responsible for paying the income referred to in column 15 of Part I]

1. Name of the person responsible for paying		2. Unique Identification No.	
<b>S.K. DIST. CENTRAL CO. OP. BANK LTD.</b>			
3. PAN of the person responsible for paying <b>AAAAT1019P</b>		4. Complete Address	
5. TAN of the person responsible for paying			
6. Email	7. Telephone No. (with STD Code) and Mobile No.		
8. Amount of income paid	9. Date on which Declaration is received (DD/MM/YY)		
10. Date on which the income has been paid/credited (DD/MM/YY)			

Place :

Date :

\_\_\_\_\_  
Signature of the person responsible for paying the income referred to in Column 15 of Part I