

Form No. 15H

[See Section 197A(1C) and Rule 29C]

Declaration under section 197A(1C) to be 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 Assessee :	3. Date of Birth (DD/MM/YYYY)
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	12. Email	13. Telephone No. (with STD Code) and Mobile No.	
14. (a) Whether assessed to tax Yes No <div style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> </div>			
(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 filed 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			
Sl. No.	Identification number of relevant investment/account etc.	Nature of income	Section under which tax is deductible

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Signature of the Declarant

Declaration / Verification

Ido 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 under sections 60 to 64 of the Income-tax Act, 1961. I further declare that the tax on my estimated total income including *income/incomes referred to in column 15 *and aggregate amount of *income/incomes referred to in column 17 computed in accordance with the provisions of the Income tax Act, 1961. for the previous year ending onrelevant to the assessment yearwill be nil.

Place

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Signature of the Declarant

Date

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.	
3. PAN of the person responsible for paying	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/yyyy)		10. Date on which the income has been paid/credited (DD/MM/yyyy)	

Place.....

.....
Signature of the person responsible for paying the income referred to in column 15 of Part I

Date.....

*Delete whichever is not applicable.