

FORM ITR-V

INDIAN INCOME TAX RETURN VERIFICATION FORM
 [Where the data of the Return of Income in Form ITR-1 (SAHAJ), ITR-2, ITR-3, ITR-4(SUGAM), ITR-5, ITR-7 transmitted electronically without digital signature].

Assessment Year 2017-18

(Please see Rule 12 of the Income-tax Rules, 1962)

PERSONAL INFORMATION AND THE DATE OF ELECTRONIC TRANSMISSION

Name ANUPAM DALMIA
 PAN AERPDS932R
 Flat/Door/Block No C/O ANUPAM VATIKA
 Name Of Premises/Building/Village
 Road/Street/Post Office STATION FEEDER ROAD
 Area/Locality STATION FEEDER ROAD
 Status Individual
 Town/City/District SILIGURI
 State WEST BENGAL
 Pin/Zip Code 734005
 Aadhaar Number/Enrollment ID XXXXX XXXX 2208
 Designation of AO (Ward / Circle) WARD (1) SILIGURI
 E-filing Acknowledgement Number 415314070270218
 Date (DD-MM-YYYY) 27-02-2018

COMPUTATION OF INCOME AND TAX THEREON

1	Gross Total Income	371177
2	Deductions under Chapter-VI-A	16459
3	Total Income	354720
4	Net Tax Payable	0
5	Interest Payable	5636
6	Total Tax and Interest Payable	14
7	Taxes Paid	5650
8	a Advance Tax	0
	b TDS	5420
	c TCS	0
	d Self Assessment Tax	230
	e Total Taxes Paid (7a+7b+7c+7d)	5650
8	Tax Payable (6-7e)	0
9	Refund (7e-6)	0
10	Exempt Income	10
	Others	
	Agriculture	

VERIFICATION

I, ANUPAM DALMIA son/ daughter of SITARAM DALMIA, holding Permanent Account Number AERPDS932R, solemnly declare to the best of my knowledge and belief, the information given in the return and the schedules thereto which have been transmitted electronically by me vide acknowledgement number mentioned above is correct and complete and that the amount of total income and other particulars shown therein are truly stated and are in accordance with the provisions of the Income-tax Act, 1961, in respect of income chargeable to income-tax for the previous year relevant to the assessment year 2017-18. I further declare that I am making this return in my capacity as _____ and I am also competent to make this return and verify it.

Sign here

Date 27-02-2018 Place SILIGURI

If the return has been prepared by a Tax Return Preparer (TRP) give further details as below:

Identification No. of TRP _____ Name of TRP _____ Counter Signature of TRP _____

For Office Use Only
 Receipt No _____
 Filed from IP address 45.249.233.154

Date _____
 Seal and signature of receiving official _____

Please send the duly signed Form ITR-V to "Centralized Processing Centre, Income Tax Department, Bengaluru 560500", by ORDINARY POST OR SPEED POST ONLY, within 120 days from date of transmitting the data electronically. Form ITR-V shall not be received in any other office of the Income-tax Department or in any other manner. The confirmation of receipt of this Form ITR-V at ITD-CPC will be sent to the e-mail address advocatategoyal@gmail.com

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