ICAR - CENTRAL INSTITUTE FOR RESEARCH ON BUFFALOES SIRSA ROAD, HISAR (HARYANA)

INCOME TAX PROFORMA FOR THE FINANCIAL YEAR 2015-16

NAME	E & I.D. NO.		
DESIGNATION			
DATE Citizer	OF BIRTH (Scientific staff only for getting benefit of Sr.		
Pan No	o. (attach a clear copy of PAN Card)		
A (i)	Amount of Hon/Fee or other income received/to be received during the year 2015-16		
(ii)	Amount of Annuity/royalty received/to be received during the year 2015-16		
B	Details of savings under Section 80(C) (Maximum Rs. 1.50 lakh) (attach a copy each of the		
(i)	document) LIC premia/United Linked Insurance Plan/Invest in NSC		
(ii)	VIII issue during 2015-16 Amount deposited/to be deposited in PPF during 2015-16		
(iii)	Fixed deposit in SBI or Public Sector Bank/Post Office Time Deposit for minimum period of 5 years		
(iv)	HBA Principal (proof of possession/completion certificate by respective authority)		
(v)	Tuition Fee paid during 15-16 (maximum 2 children with copy of receipts)		
С	Details of deduction under Section 80(D) (attach a copy each of the document)		
(i)	Mediclaim (maximum Rs. 25,000/-), (for Sr. Citizen Rs. 30,000/-		
(ii)	Rs. 25,000/- to upkeep in force an insurance on the health of his parent/parents. (for senior citizen it is Rs. 30,000/-)		
(iii)	Payment for preventive health checkup of the assessee his family and parents maximum of Rs. 5000/- subject to ceiling as in (i) above		
D	Details of deduction under Section 80(DD) (attach a copy each of the document)		
(i)	Expenditure incurred on dependent handicapped on his treatment/maintenance/rehabilitation (Max. Rs. 50000/1.00 lak)		
Ε	Details of deduction under Section 80(E) (attach a copy each of the document)		
(i)	Any amount paid by way of interest on education loan		
F	Details of deduction under Section 80(G) (attach a copy each of the document)		
(i)	Any donation for charitable purpose		
G	Details of deduction under Section (U) (attach a copy of disability certificate)		
(i)	Deduction of Rs. 50,000/- if assessee disability is 40% and above and Rs. 1.00 lakh if disability is 80% and above		
Η	Amount of deduction claimed u/s 10 (along with original rent receipt, Photo I-card for proof of residence/copy of PAN card of landlord alongwith details in Annexure-I attached		

(i)	House Rent paid if living in rented house during 2015-16 (as	
(1)	per CBDT circular deduction u/s 10 for payment of rent will	
	be allowed only after detailed verification of landlord profile	
	and photo identity card of the incumbent in respect of the	
	address where he is residing.)	
Ι	Details of deduction u/s 24 (attach copy of possession/completion certificate)	
	Interest on borrowed capital for acquisition/construction of	
	house with proof of possession of flat/house by respective	
	authorities in which construction is going (also provides	
	details as per Annexure II & III)	
(i)	Address of the property against which loan is taken	
(ii)	Self-occupied/rented	
(iii)	Date of loan availed	
(iv)	Purpose of loan (construction/acquiring property)	
(v)	Date on which construction is/will be completed	
(vi)	Date of possession of property	
(vii)	Ownership (sole or joint), if joint, relationship and	
	percentage of share in the property	
(viii)	Whether joint owners is/are claiming deduction under	
	income Tax Act 1961 (Pl. indicate amount	
J	Any other item	
	1	

Note : Income Tax Assesse claiming the above deduction/rebate under different sections of IT Act are required to provide documentary proof regarding the claim, failing which no deduction/rebate will be allowed.

(SIGNATURE)

Place of posting ______ Contact Number _____

Annexure-I

ICAR - CENTRAL INSTITUTE FOR RESEARCH ON BUFFALOES SIRSA ROAD, HISAR (HARYANA)

Those who are paying rent for his/her residential purpose and seeking rebate on Income Tax, the following details of the landlord be furnished:

Name of the landlord	
Address	
PAN (landlord)	
In case there is no PAN of the Landlord,	
declaration to this effect from the Landlord be	
attached alongwith copy of the property tax paid	
Relationship with the employee, if any	
Whether the person to whom Rent being paid is	
declared to be dependent to the employee and the	
declaration to this effect is submitted to the	
concerned Establishment Section or not	
Whether the employee or his/her Spouse owns	
residential accommodation or not. If so the details	
& status be furnished	
Whether the spouse of the employee is availing	
Income Tax rebate on account of rent being paid	
from his/her employer.	

Signature	:
Name & Designation	:
ID No.	:
Place of posting	:
Contact No.	:

Annexure –II

Form for sending particulars of Income under Section 192(2B) for the year ending 31st March, 2016

IVIA	<u>(1, 2010</u>	
1.	Name & Designation of the employee	
2.	Permanent Account Number (PAN)	
3.	Residential Status with address, i.e. whether self- occupied/let out (details in Annexure-III may also be furnished)	
4.	Particulars of income under any head of income other than salaries (not being a loss under any such head other than the loss under income from house property) received in the financial year.	
	(i) Income from house property	
	(ii) Profiles and gain of business or profession	
	(iii) Capital Gains	
	(iv) Income from other source	
	(v) Dividents	
	(vi) Interest	
	(vii) Other income (specify)	
5.	Aggregate of sub-items (i) to (iv) of sub-item 4	
6.	Tax deducted at source (enclose certificate) issued under	
	Section 203	

Place : Date :

(Signature of the employee)

Verification

I ______ do hereby declare that what is stated above is true to the best of my knowledge and belief. Verified today the _____.

Place : Date :

(Signature of the employee)

Annexure-III

COMPUTATION OF INCOME/LOSS FROM HOUSE PROPERTY

1.	Location of property	
2.	Status	
3.	Annual value-amount for which the property might reasonably be let out or annual Municipal valuation or actual rent received or receivable which ever is the highest.	
4.	Less – Municipal tax paid	
5.	Net adjusted annual value	
6.	Less – deduction under Section 24(1) 30% of (Net adjusted Annual value)	
7.	Less – Interest on borrowed capital	
8.	Net income from house property	

Name & Designation :

Dated :

Signature :