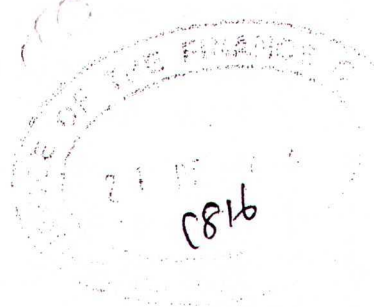


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**INCOME TAX DEPARTMENT
OFFICE OF THE ASSTT. COMMISSIONER OF INCOME TAX (TDS)
C.R. BUILDING, I.S. PRESS ROAD, KOCHI-682018.
Ph: 0484 295554, 2795643**

F.No. ACIT(TDS)/Kochi/12BB/2016-17/47

Date:14/12/2016

To
THE COCHIN UNIVERSITY OF SCIENCE & TECHNOLOGY
ADMINISTRATIVE OFFICE, CUSAT,
KALAMASSERY, KOCHI – 682022

Sir/Madam,

Sub: Furnishing of evidence of claims by employee for deduction
of tax u/s.192 – reg -TAN No. CHNC00786C

Your kind attention is drawn to the above.

As per notification by the Central Board of Direct Taxes, New Delhi dated 29.04.2016, the assessee shall furnish to the person responsible for making payment under sub section 1 of Section 192, , the evidence or the particulars of the claims referred to in sub rule(2), in Form No.12BB (format enclosed) for the purpose of estimating his income or computing the tax deduction at source.

The Drawing and Disbursing Officer should obtain the evidence from the assessee and accordingly TDS is required to be effected.

It is also requested that all the DDOs may be notified to this requirement prescribed by the CBDT.

Thanking you,

Yours faithfully,

(VIJAYALAKSHMI SRIVIDHARAN)
Asstt. Commissioner of Income -tax (TDS), Kochi.



PTB

FORM NO.12BB

(See rule 26C)

1. Name and address of the employee:			
2. Permanent Account Number of the employee:			
3. Financial year:			
Details of claims and evidence thereof			
SI No.	Nature of claim	Amount (Rs.)	Evidence / particulars
(1)	(2)	(3)	(4)
1	House Rent Allowance: (i) Rent paid to the landlord (ii) Name of the landlord (iii) Address of the landlord (iv) Permanent Account Number of the landlord Note: Permanent Account Number shall be furnished if the aggregate rent paid during the previous year exceeds one lakh rupees		
2	Leave travel concessions or assistance		
3	Deduction of interest on borrowing: <i>(House property)</i> (i) Interest payable/paid to the lender (ii) Name of the lender (iii) Address of the lender (iv) Permanent Account Number of the lender (a) Financial Institutions(if available) (b) Employer(if available) (c) Others		
4	Deduction under Chapter VI-A (A) Section 80C, 80CCC and 80CCD (i) Section 80C (a) (b) (c) (d) (e) (f) (g) (ii) Section 80CCC (iii) Section 80CCD (B) Other sections (e.g. 80E, 80G, 80TTA, etc.) under Chapter VI-A. (i) section..... (ii) section..... (iii) section..... (iv) section..... (v) section.....		
Verification			
I,.....,son/daughter of..... do hereby certify that the information given above is complete and correct.			
Place.....		(Signature of the employee) Full Name	
Date.....			
Designation			