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Online canteen smart card application form

No. 102
Application Form
(Application Form for Smart Card)

1. Name of the applicant (in English and Kannada)
2. Address (in English and Kannada)
3. Telephone No. (in English and Kannada)
4. Date of Birth (DD/MM/YYYY)
5. Date of Issue (DD/MM/YYYY)
6. Date of Expiry (DD/MM/YYYY)
7. Name of the Institution (in English and Kannada)
8. Name of the Department (in English and Kannada)
9. Name of the Officer (in English and Kannada)
10. Designation (in English and Kannada)
11. Date of Appointment (DD/MM/YYYY)
12. Date of Termination (DD/MM/YYYY)
13. Date of Last Salary Payment (DD/MM/YYYY)
14. Date of Last Salary Payment (DD/MM/YYYY)
15. Date of Last Salary Payment (DD/MM/YYYY)

APPLICATION FORM FOR INTERBANK GIRO FOR PAYMENT OF CREDIT / CHARGE CARD ACCOUNT

1. Name of the Applicant (in English and Kannada)
2. Address (in English and Kannada)
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Office Address
Name of office
Flat / Room / Door / Block No.
Name of Premises / Building / Village
Road / Street / Lane/Post Office
Area / Locality / Taluka/ Sub-Division
Town / City / District
State / Union Territory
Pincode / Zip code
Country Name

8. Address for Communication
Residence
Office (Please tick as applicable)

9. Telephone Number & Email ID details
Country code Area/STD Code Telephone / Mobile number
Email ID

10. Status of applicant
Please select status. as applicable
 Individual Hindu undivided family Company Partnership Firm Government
 Trusts Body of Individuals Local Authority Artificial Juridical Persons Association of Persons
 Limited Liability Partnership

11. Registration Number (for company, firms, LLPs etc.)

12. In case of a person, who is required to quote Aadhaar number or the Enrolment ID of Aadhaar application form as per section 139 AA
Please mention your AADHAAR number (if allotted) _____
If AADHAAR number is not allotted, please mention the enrolment ID of Aadhaar application form _____
Name as per AADHAAR letter or card or as per the Enrolment ID of Aadhaar application form _____

13. Source of Income
Please select as applicable
 Salary Capital Gains
 Income from Business / Profession Business/Profession code _____ (For Code: Refer instructions) Income from Other sources
 Income from House property No income

14. Representative Assessee (RA)
Full name, address of the Representative Assessee, who is assessable under the Income Tax Act in respect of the person, whose particulars have been given in the column 1-13.
Full Name (Full expanded name: initials are not permitted)
Please select title as applicable Shri Smt. Kumari M/s
Last Name / Surname _____
First Name _____
Middle Name _____

Address
Flat / Room / Door / Block No.
Name of Premises / Building / Village
Road / Street / Lane/Post Office
Area / Locality / Taluka/ Sub-Division
Town / City / District
State / Union Territory
Pincode

15. Documents submitted as Proof of Identity (POI), Proof of Address (POA) and Proof of Date of Birth (POB)
I/We have enclosed _____ as proof of identity, _____ as proof of address and _____ as proof of date of birth.
(Please refer to the instructions (as specified in Rule 114 of I.T. Rules, 1962) for list of mandatory certified documents to be submitted as applicable)
(Annexure A, Annexure B & Annexure C are to be used wherever applicable)

16. I/We _____, the applicant, in the capacity of _____ do hereby declare that what is stated above is true to the best of my/our information and belief.
Place: _____
Date: _____
Signature / Left Thumb Impression of Applicant (inside the box)

Note: As per provisions of Section 272B of the Income Tax Act, 1961, a penalty of ₹ 10,000 can be levied on possession of more than one PAN.

