

FORM 34BA

**INTIMATION TO THE ASSESSING  
OFFICER OF HAVING MADE AN  
APPLICATION TO THE SETTLEMENT  
COMMISSION**  
(See Section 245C of the Income-tax Act, 1961  
and rule 44C of the Income-tax Rules, 1962)

For Office use only

Receipt No.                      Date  
.....                                      .....

Seal and Signature of  
Receiving Official

<b>PART-A PERSONAL INFORMATION</b>	Name		PAN											
			<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td> </tr> </table>											
	Flat/Door/Block No.	Name of Premises/Building/Village		Status (Tick) <input checked="" type="checkbox"/>										
				(i) Individual <input type="checkbox"/>										
	Road/Street/Post Office	Area/Locality		(ii) Hindu undivided family <input type="checkbox"/>										
		State	Pin Code	(iii) Company <input type="checkbox"/>										
	Town/City/District		<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td> </tr> </table>								(iv) Firm <input type="checkbox"/>			
E-mail Address	STD code and Phone Number (    )		(v) Cooperative Society <input type="checkbox"/>											
			(vi) Local Authority <input type="checkbox"/>											
			(vii) Association of persons/Body of individuals not covered by (v) or (vi) <input type="checkbox"/>											
<b>PART-B ASSESSMENT JURISDICTION AND FILING STATUS</b>	1.	Designation of Assessing Officer ( <i>Ward/Circle</i> )												
	2.	The Commissioner having jurisdiction over the applicant												
	3.	Assessment year(s) in connection with which the application for settlement is made and the date of filing the return												

**CERTIFICATE**

I, ....., son/daughter/wife of ..... do hereby certify that I have made today an application in Form No. 34B under sub-section (1) of section 245C of the Income-tax Act with above-mentioned particulars to the Settlement Commission at ..... Bench by post/by hand (*delete whichever is not applicable*) vide Receipt No. .... (*write receipt No. in the case application has been made by hand*) in my capacity as ..... [*write your designation*]

Place		Date		Signature of applicant	
-------	--	------	--	------------------------	--