







**Verification**

I/we\* \_\_\_\_\_ in my/our\* capacity as \_\_\_\_\_ do hereby declare that what is stated above is true to the best of my/our\* knowledge and belief.

Verify today, the

		-			-				
D	D		M	M		Y	Y	Y	Y

\_\_\_\_\_  
(Signature/Left Thumb Impression of Applicant)

**Note:**

1. This column is applicable only if a single TAN is applied for the whole company. If separate TAN is applied for different divisions/branches, please fill details in (d).
2. For branch of individual business/Hindu undivided family, please fill details in (f).
3. For branch of firm/AOP/AOP (Trust)/BOI/artificial juridical person, please fill details in (h).
4. \*Delete whichever is inapplicable.