

**DECLARATION FOR OTHER SAVINGS FOR THE COMPUTATION OF INCOME TAX**

(To be submitted to the Bill clerks on or before ~~31.03.2014~~ It is compulsory for every employee/officer to submit this declaration)

|       |   |                          |
|-------|---|--------------------------|
| 1 a)  | Name of the employee/Officer  |                          |
| b)    | Designation:  |                          |
| c)    | Office / Station/Depot  |                          |
| d)    | Contact No. (Office/CUG)  |                          |
| 2. a) | PF Number   |                          |
| b)    | Bill Unit No.:  |                          |
| c)    | PAN Number  |                          |
| 3 a)  | Residential Address   |                          |
| b)    | Indicate whether residing in own house or rented house:   | Own house / Rented house |
| c)    | If rented house, indicate the amount of rent being paid monthly. (Rent receipt is to be enclosed)   |                          |
| 4.    | Details of deduction under Sec. 80 C (Maximum amount admissible for deduction is ₹ 1,50,000 only) Now under Section 80 CCD, a deduction up to ₹ 50,000/- is allowed over and above the limit of ₹1,50,000/- in respect of contribution made to NPS. | > ₹                      |

**a. Insurance Policies:**

| Sl.No. | Name of the Insurance Company | Policy No. | Premium amount paid | Period of quarter, half year & whole year for which premium paid | Date of payment of premium |
|--------|-------------------------------|------------|---------------------|--|----------------------------|
| 1.     | -                             |            |                     |  |                            |
| 2.     | -                             |            |                     |  |                            |
| 3.     | -                             |            |                     |  |                            |

**b. Tuition fees paid to School / College (Limited to 2 Children only)**

| Sl.No. | Name of the Child. | Class / Std. | Name of School / College | Amount of tuition fee paid | Date of payment |
|--------|--------------------|--------------|--------------------------|----------------------------|-----------------|
| 1.     | -                  |              |                          |                            |                 |
| 2.     | -                  |              |                          |                            |                 |

c) Indicate the details of other savings particulars viz., NSC-VIII, PPF, NSS-92,

|  |  |
|--|--|
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|    |  |  |
|----|--|--|
|    | ULIP, Post Office Time Deposit- Rule 1981 etc. etc.,   |  |
| d) | Details of repayment of loan made towards HBA (Principal) through financial institution for the year           |  |
| 5. | Details of earnings / loss on property for the year  |  |
|    | i) Income from house property: (Gain)  |  |
|    | j) Loss from house property: (interest)  |  |
|    | k) Whether housing loan borrowed:  |  |
|    | l) Date of loan availed:   |  |
| 6  | Details of deduction under Chapter - VIA   |  |
|    | a) Mediclaim u/s 80 D ( ₹ 25000/-)   |  |
|    | b) Expenditure incurred on medical treatment, training and rehabilitation of Handicapped Dependent – u/s 80DD: |  |
|    | c) For Permanent physical Disablement U/S 80 U:  |  |
| 7  | Details of any other savings permissible under IT Act. :   |  |

(Photo copy of documentary proof as required under I.T Act for the savings / expenditure for the items 4 to 7 shown above are to be enclosed along with this Declaration form without fail) .

|   |  |  |
|---|--|--|
| 8 | In case, no savings details are furnished under item No. 4 to 7 above, the employee is to indicate whether any subscription of VPF is required to be deducted from salary and if so, indicate the amount of VPF to be recovered from salary. |  |
|---|--|--|

The particulars furnished by me vide item 1 to 8 above are true, correct and complete to the best of my knowledge.

Place:

Signature of employee/Officer :

Date:

Name (in capital letters):

PF NO.