SHRI RAM COLLEGE OF COMMERCE

(UNIVERSITY OF DELHI)

**Submission of Investment Declaration/Proof - Financial Year 2016-17 for Calculating T.D.S. (A.Y. 2017-18)**

|  |  |
| --- | --- |
| Employee Code |  |
| Name |  |
| PAN (Mandatory)  |  | DOB: |
| Contact no. & Email id |  |

U/S 24

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1 | Housing Loan — Repayment of Interest | Rs. | Date of Possession of Property: |  |
|  | Under Construction [ ] / Self Occupied [ ] |  | “**Claim available only after possession of property**.” |

U/S 80 C

|  |  |  |
| --- | --- | --- |
| 2 | Housing Loan — Repayment of Principal | Rs. |
| 3 | Provident Fund/Public Provident Fund/ National Savings Certificates | Rs. |
| 4 | Sukanya Samriddhi Scheme | Rs. |
| 5 | ELSS / Mutual Fund (Tax savings exempt u/s 80C only) | Rs.. |
| 6 | Unit Linked Insurance Scheme | Rs. |
| 7 | Payment of Life Insurance Premium | Rs. |
| 8 | Children Education Fees (Only Tuition Fees) (Max. 2 Children) | Rs. |
| 9 | Five Years Tax Savings Fixed Deposit (Bank/Post Office) | Rs. |
| 10 | Pension Plan (80CCC) | Rs. |
| 11 | Investment in NPS (80CCD) (Additional Investment in NPS Tier I) | Rs.. |
| Aggregate amount of investments u/s 80C, 80CCC Rs.1,50,000/-+ u/s 80CCD(1b) Additional deduction of Rs.50,000/- |

Other deductions under Chapter VI-A

|  |  |  |
| --- | --- | --- |
| 12 | Mediclaim - U/S 80D | Rs. |
| 13 | Payment of Education Loan Interest — U/S 80E | Rs. |
| 15 | Physically Handicapped — 80U (Pls. submit Form 10-IA) | Rs. |

I hereby declare that what is stated above is correct. I undertake to inform any change in the above facts. I further undertake to provide all documentary proofs of investment details before 31st December, 2016 and if I fail to do so, the college can make full deduction of income tax dues from my salary.

Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_                                            \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Employee**

SHRI RAM COLLEGE OF COMMERCE

(UNIVERSITY OF DELHI)

**DECLARATION FOR HOUSE RENT ALLOWANCE RELIEF – FINANCIAL YEAR 2016-17**

**Details of rent actually paid:**

a.   Address of residential property in respect of which rent paid

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

b.       Name of Landlord: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

c. PAN No. of Landlord to whom rent is paid\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

d.       Rent payable / paid during the Financial Year:  Rs.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **S.No.** | **Month** | **Amount Paid** |
|  | March, 2016 |  |
|  | April, 2016 |  |
|  | May, 2016 |  |
|  | June, 2016 |  |
|  | July, 2016 |  |
|  | August, 2016 |  |
|  | September, 2016 |  |
|  | October, 2016 |  |
|  | November, 2016 |  |
|  | December, 2016 |  |
|  | January, 2017 |  |
|  | February, 2017 |  |
|  | Total |  |

\* PAN No. of Landlord is compulsory in case of Rent paid is more Rs.1,00,000/- per year.

**(Please attach copy of Lease / Rent Agreement. In case no agreement is executed submit copy of ORIGINAL rent receipts for April, 2016 and for current month. In case rent receipt is not submitted, the relief will not be given.)**

**DECLARATION:**

i.  I hereby declare that I shall inform immediately to the College in case of any change in monthly rent stated above or discontinuation of house rent payments.

ii. I also declare that no residential accommodations owned by me or by my spouse or by my child or by HUF of which I am a member at the place where I reside or perform the duties of employment.

iii.I hereby declare that what is stated above is true and correct. Any Income Tax dues arising out of wrong declaration will be my sole responsibility.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Employee**