Department of Trade and Taxes Government of NCT of Delhi

Form Dvat 45A [See rule 59]

Application for cancellation/amendment(s) in particulars subsequent to allotment of Tax Deduction Account Number (TAN) under Dvat Act, 2004

| Type of application (tick as | | Amendment | Cancellation |
|--|---|------------------|--------------|
| applicable) Date of amendment/cancellation | | | |
| (mm/dd/yyyy) | | | |
| Instruction for filing form Dvat 45A | | | |
| (i) In case of amendment of existing particulars, please fill column No. 1 and thereafter only those | | | |
| fields that are to be amended. All other fields should be left blank. | | | |
| (ii) In case of cancellation, fill all the columns and also enclose original form Dvat 45 | | | |
| | | | |
| 1. | Tax Deduction Account Number | | |
| 2. | Full name of person responsible for deduction of Tax | | |
| 3. | Address: | | |
| | Building name/number: | | |
| | Area/road/locality/market | | |
| | Pin code | | |
| | Mobile No | | |
| | Fax no. | | |
| | Email Id | | |
| 4. | TIN, if registered | | |
| | | | |
| | 5. Verification | | |
| | I/Wehereby solemnly affirm and declare that the | | |
| | information given hereinabove is true and correct to the best of my/our knowledge and | | |
| | belief and nothing has been concealed therefrom. | | |
| | Signature of Autho | orized signatory | |
| | Full Name | | |
| | Designation | | |
| | | | |
| | | | |
| Place: | | | |
| | | | |
| Date: | | | |