

# FORM - XXXI

Department of Commercial Taxes, Government of Uttar Pradesh

[See rule-49(1) of the UPVAT Rules, 2008]

## Certificate of Tax Deduction at Source

(Original- for Assessing Authority)

Book No .....

Serial No .....

(To be filled in by the Assistant Commissioner)

TIN/TDN 

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w.e.f. 

d	d	m	m	y	y	y	y
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1-Date of Issue -----

2-Seal of Firm

3- Seal of Issuing Officer

(To be filled in by the Contractee/Purchaser)

1-	Name and Address of Contractee / Purchaser																							
2-	TIN / TDN															w.e.f.	d	d	m	m	y	y	y	y
3-	Assessment Year								y	y	y	y	-	y	y	y	y							
4-	Month ending on															d	d	m	m	y	y	y	y	
5-	Name and Address of Contractor/seller/ supplier																							
6-	TIN / TDN															w.e.f.	d	d	m	m	y	y	y	y

### Details of deposit in Bank or Treasury

SL. No	Name of month	Amount deducted	Amount deposited	Challan No.Date	Branch of Bank Treasury / Sub-Treasury
Amount deposited in Bank/Treasury (in fig.)				In words	

### DECLARATION

I.....s/o, d/o, w/o..... Status....., do hereby declare that the particulars given above and on the back of this certificate are correct and true to the best of my knowledge and belief.

Place -

Signature

Date -

Name and Designation of authorized person

Seal

Note - This declaration shall be signed by a person mentioned in column 2 of the table given in the Rule-48(2) of Uttar Pradesh Value Added Tax Rules, 2008.

**Details of payments**

Sl. No.	Name & address of person from whom VAT is deducted	TIN	Contract No. & date or tax/sale invoice no. & date	Nature of contract (Works contract/ supply/lease etc.)	Gross amount paid or of tax/sale invoice	Amount deducted as VAT	Amount paid	Date of payment
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>

Place -  
Date -

Signature, Name and  
Designation of authorized person

# FORM - XXXI

Department of Commercial Taxes, Government of Uttar Pradesh

[See rule-49(1) of the UPVAT Rules, 2008]

## Certificate of Tax Deduction at Source

(Duplicate- for Contractor)

Serial No.....

Book No.....

(To be filled in by the Assistant Commissioner)

TIN/TDN 

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w.e.f. 

d	d	m	m	y	y	y	y
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1-Date of Issue -----

2-Seal of Firm

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(To be filled in by the Contractee/Purchaser)

1-	Name and Address of Contractee / Purchaser																			
2-	TIN / TDN											w.e.f.	d	d	m	m	y	y	y	y
3-	Assessment Year	y	y	y	y	-	y	y	y	y										
4-	Month ending on											d	d	m	m	y	y	y	y	
5-	Name and Address of Contractor/seller/ supplier																			
6-	TIN / TDN											w.e.f.	d	d	m	m	y	y	y	y

### Details of deposit in Bank or Treasury

SL. No	Name of month	Amount deducted	Amount deposited	Challan No.Date	Branch of Bank Treasury / Sub-Treasury
Amount deposited in Bank/Treasury (in fig.)				In words	

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Place -

Signature

Date -

Name and Designation of authorized person

Seal

Note - This declaration shall be signed by a person mentioned in column 2 of the table given in the Rule-48(2) of Uttar Pradesh Value Added Tax Rules, 2008.

**Details of payments**

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Place -  
Date -

Signature, Name and  
Designation of authorized person



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Place -  
Date -

Signature, Name and  
Designation of authorized person