

O/o CHIEF COMMISSIONER OF INCOME TAX, KOLKATA P-7, CHOWRINGHEE SQUARE, KOLKATA-700069

PROFORMA TO BE FILLED IN BY THE APPLICANT FOR ISSUE OF IDENTITY CARD

(ALL FIELDS ARE MANDATORY)

CI N-	Particulars	Description
Sl.No.	Full Name [in block letters]	DOD () COO.
	Designation	
3	Group [Please tick (√) appropriate box]	A B Gazetted B Non-Gazetted C D Pensioner
4	Posting	O/o
5	a) Reason for issuing new I. Card [Please tick (√) appropriate box]	Lapse New Appointment Promotion Transfer Other(*)
	b) *In case of 'other' reason, please specify	
	c) In case of 'New Appointment/ Promotion/ 'Transfer', write Order No. & date	
6	Date of birth	/ /
7	Father's Name	
8	Date of Joining in Income Tax Department	
9	Identification Marks	
10	Residential Address	Pin Code :
11	Telephone/Mobile No.	
12	Blood Group	
13	Employee Code (PPO No. in case of pensioners)	
14	Previous Identity Card No with date of issue	
 Point ii) iii) iv (C Se is) Mutilation of Identity Card Rs. 50/- i) Late Renewal of Identity Card Rs. 25/- for (Pass beyond one month) thereof, up to a	
T	ransfer, please attach <u>Copy of Order</u> .	
I do hereby agreed the above Rules and Regulation.		Specimen Signature of the applicant (Signature does not spill out of the box)
	(Signature of the applicant with date)	
Signature	of Head of Office/DDO tested in case of Pensioner)	
Date	: For all	Office Seal
Whether la	ceipt of application : Yes/No	Date & issue No. of order to vendor : Register Entry No. :
Date of receipt of I. Card from vendor : Date of issue to applicant :		

Signature of the Office Superintendent/In Charge

Deposit Application Form in Rm. No. 27, 1st fl. through proper channel and collect your Identity Card after 12 working days from Rm. No. 8, 1st fl.

