

GOVT. OF NATIONAL CAPITAL TERRITORY OF DELHI
Ch. Brahm Prakash Government Engineering College, Jaffarpur
(An Institute Specializing in Civil & Environmental Engineering, New Delhi-110073)
(website: www.gecdelhi.ac.in, email-cbpgcej@gmail.com)

F.NO. 4(53)/CBPGECJ/Budget/2019-20/3169-71

DATED: 2/1/2020

CIRCULAR

All Permanent/ Contractual Employees and T.S.S of the office are hereby requested to submit their savings for the purpose of income tax calculation in r/o F.Y. 2019-20 on prescribed form. For timely tax calculation of all employees the **last date for submitting duly filled Performa is 08.01.2020**. All concerned are requested to submit the duly filled form before the last date, positively. *Saving Performa & Form 12 B13 enclosed herewith and also available on college website.*

R. Sharma
01/01/2020
(RAM NIWAS SHARMA)
D.D.O, CBPGECJ

Copy to:

1. All Permanent Staff/Faculty.
2. All Contractual Faculty/T.S.S.
3. PA to Principal for Implementation

R. Sharma
01/01/2020
(RAM NIWAS SHARMA)
D.D.O, CBPGECJ

(SAVING PROFORMA)

Details furnished by the officers/official for the purpose of assessment of income tax for the financial year 2019-20.

Name (in Block letters) Sh./Smt. :

PAN NO.

1. Contribution towards GPF : -----
 2. CPF Contribution : -----
 3. CGEIS : -----
 4. LIC/BOND : -----
 5. PPF/ULIP NSC/PLI/TUITION FEES : -----
 6. NSC/PLI/TUITION FEES : -----
 7. REPAYMENT OF HBA (PRINCIPAL) : -----
 8. INT. ON H.B.A. : -----
 9. Whether drawing H.R.A and if so Rent paid per month : -----
- (Copy of PAN card of owner is required if rent paid exceeding to Rs. 8333/per month.)
10. Income from any other source.: Rs.-----
 11. Medical claim Policy (80 D) : Rs.-----

*PLEASE ATTACH DOCUMENTAY PROOF FOR SAVINGS

Certified that:-

1. I am actually residing at the above mentioned address
2. My husband/wife is not claiming any income tax rebate on any of the saving shown above/not taking the benefits of HRA rebate for the financial year 2019-20.
3. Certified that the information furnished as above are correct.

Signature

Name & Designation

Statement showing particulars of claim by an employee for deduction of tax under section 192 of the Income Tax Act, 1961

1 Personal Information
 Empl - I.d. - _____ Name - _____ PAN - _____
 Date of Birth - _____ Male/Female _____ Designation - _____
 Date of Joining - _____ Location/Unit - _____ No. of children - _____
 Permanent Address - _____

2 Income From Previous Employment (For those who joined after 01-Apr-2014)

	Amount	Evidence /Particulars
- Salary Income from Previous employer (submit salary certificate/Form 16/Form 12 B/Authenticated Tax Computation sheet)	_____	_____
- Tax Deducted by previous Employer	_____	_____

3 House Rent Allowance :

	Per Month	Amount	Evidence/Particulars
a) Rent Paid to the Landlord	_____	_____	_____
b) Name of the Landlord	_____	_____	_____
c) Address of the Landlord	_____	_____	_____
d) PAN of the Landlord	_____	_____	_____
e) Address of Rented Occupied House	_____	_____	_____
- Address	_____	_____	_____

Note :- Permanent Account Number (PAN) of landlord is mandatory in case Rent paid exceeds Rs. 1,00,000/- p.a.

Note : Rent Receipt should be MONTH WISE.

4 Deduction of Interest on borrowing: (Housing Loan Only)

	Amount in Rs	Evidence /Particulars
i) Interest payable/paid to lender	_____	_____
ii) Name of the lender	_____	_____
iii) Address of the lender	_____	_____
iv) PAN of the lender	_____	_____
(a) Financial Institution (if available)	_____	_____
(b) Employer (if available)	_____	_____
(c) Others	_____	_____

5 Detail of Investment for deduction under Chapter VI A during the F.Y. 2019-20

	Amount		Amount
1 U/S 80 C (MAX. Rs. 1,50,000/-)			
- Provident Fund (Employee Contribution)	_____	- Sukanya Simridhi Yojana	_____
- PPF (Upto Rs.1,50,000/-)	_____	- Children Tuition Fee (Max 2 Child)	_____
- Housing Loan Repayment (Principal Only)	_____	- Mutual Fund, ELSS,	_____
- Insurance Premium LIC & Others	_____	- Tax Saver Bond u/s 80C	_____
- NSC, Fixed Deposit(Tax Saver, i.e. >=5 Years),	_____	- Any Other Proposed Investments	_____
2 Medical Insurance (u/s 80D) Rs. 25,000/- (Self & Family) & Rs. 50,000/- (For Sr Citizen Parent: Max Rs 55000/75,000)			
3 Medical treatment for Handicapped Dependents (u/s - 80DDB)			
4 Medical treatment of self disability u/s 80U (Not less than 40%)			
5 Higher Education Loan Interest (u/s 80E) Date from which repayment of loan started.			
6 NPS (National Pension Scheme) Max of Rs 50,000/- u/s 80CCD(1B)			
7 Exemption of Interest for Sr Citizens on Interest (u/s 80TTB) Max Upto 50000			

Bills & Certificate Required _____
 Certificate Required _____

6 Declaration
 I _____ son/daughter of _____ do hereby certify that the information given above is complete and correct

Contact No.	Mobile	Direct No./Extn.	(Signature of the employee)
_____	_____	_____	_____
			Date

Note: The Date of Investment must be between 01-04-2014 to 31-03-2020
 It is the Responsibility of DDO to ensure that this form is Completely filed by employees
 All the Deduction under form 16 shall be allowed only when they are claimed under this Form