# Application form for Tax Collection Account Number

**Instructions :** Use capital letters. Write on letter in each box. Keep an empty box in between two words. Avoid abbreviation as much as possible.

(To be filled in by the collecting / deducting authority)

**1. Name of the authority / person required to deduct or collect tax under Chapter VII of the Income Tax Ordinance :**

**2. Date of Incorporation / Registration (Wherever applicable) :**

**Day** **Month** **Year**

**3. Address :**

District

Post Code

**4. Telephone Number :**

**5. Fax Number :**

**6. E-mail address :**

**7. Tax Payer's Identification Number (TIN) :**