

INCOME-TAX RULES, 1962

FORM NO. 35

(See rule 45)

Appeal to the Commissioner of Income-tax (Appeals)

Personal Information	First Name		Middle Name	Last Name or Name of Entity		PAN		
						TAN (if available)		
	Flat/ Door/ Block No.			Name of Premises/ Building/ Village		Road/ Street/ Post Office		
	Area/ Locality			Town/City/District		State (Select)		
	Country (Select)	Pin Code		Phone No. with STD code/ Mobile No.	Email Address			
					Whether notices/ communication may be sent on email? Yes/ No			
Order against which Appeal is filed	1	Assessment year in connection with which the appeal is preferred/ Enter financial year in case appeal is filed against an order where assessment year is not relevant				Assessment Year		
						Financial Year		
	2	Details of the order appealed against						
		a	Section and sub-section of the Income-tax Act, 1961					
		b	Date of Order					
	c	Date of service of Order / Notice of Demand						
	3	Income-tax Authority passing the order appealed against						
Pending Appeal	4	Whether an appeal in relation to any other assessment year/ financial year is pending in the case of the appellant with any Commissioner (Appeals)					Yes/ No	
	4.1	If reply to 4 is Yes, then give following details.-						
		a	Commissioner (Appeals), with whom the appeal is pending					
		b	Appeal No. and date of filing of appeal					
		c	Assessment year/ financial year in connection with which the appeal has been preferred					
		d	Income-tax Authority passing the order appealed against					
		e	Section and sub-section of the Income-tax Act, 1961, under which the order appealed against has been passed					
	f	Date of such Order						
Appeal Details	5	Section and sub-section of the Income-tax Act, 1961 under which the appeal is preferred						
	6	If appeal relates to any assessment						
		a	Amount of Income Assessed (in Rs.)					
		b	Total Addition to Income (in Rs.)					
		c	In case of Loss, total disallowance of Loss in assessment (in Rs.)					
		d	Amount of Addition/ Disallowance of Loss disputed in Appeal (in Rs.)					
		e	Amount of Disputed Demand (in Rs.) – Enter Nil in case of Loss					
		7	If appeal relates to penalty:					
		a	Amount of penalty as per Order (in Rs.)					
		b	Amount of penalty disputed in Appeal (in Rs.)					

Details of Taxes paid	8	Where a return has been filed by the appellant for the assessment year in connection with which the appeal is filed, whether tax due on income returned has been paid in full			Yes/No/ Not Applicable
	8.1	If reply to 8 is Yes, then enter details of return and taxes paid			
		a	Acknowledgement number		
		b	Date of filing		
		c	Total tax paid		
	9	Where no return has been filed by the appellant for the assessment year, whether an amount equal to the amount of advance tax as per section 249(4)(b) of the Income-tax Act, 1961 has been paid			Yes/No/ Not Applicable
	9.1	If reply to 9 is Yes, then enter details			
		Tax Payments			
		BSR Code	Date of payment	Sl. No.	Amount
		Total			
	10	If the appeal relates to any tax deductible under section 195 of the Income-tax Act, 1961 and borne by the deductor, details of tax deposited under section 195(1)			
		BSR Code	Date of payment	Sl. No.	Amount
Statement of facts, Grounds of Appeal and additional evidence	11	Statement of Facts			
		Facts of the case in brief (not exceeding 1000 words)			
		List of documentary evidence relied upon			
	12	Whether any documentary evidence other than the evidence produced during the course of proceedings before the Income-tax Authority has been filed in terms of rule 46A			Yes / No
	12.1	If reply to 12 is Yes, furnish the list of such documentary evidence			
13	Grounds of Appeal (each ground not exceeding 100 words)				
	1.				
	2.				
	3.				
Appeal filing details	14	Whether there is delay in filing appeal			Yes/ No
	15	If reply to 13 is Yes, enter the grounds for condonation of delay (not exceeding 500 words)			
	16	Details of Appeal Fees Paid			
		BSR Code	Date of payment	Sl. No.	Amount
	17	Address to which notices may be sent to the appellant			

Form of verification

I, _____ the appellant, do hereby declare that what is stated above is true to the best of my information and belief. It is also certified that no additional evidence other than the evidence stated in row 12.1 above has been filed.

Place

Signature

Date