

FORM NO. 133

[See rule 215(1)[Table: Sl. No. 4]]

Certificate under section 395(4) for tax collected at source

PART A

Certificate No.		Last updated on	
Row No.	Details of the collector		
1.	Name	(refer Note 1)	
2.	Address	(refer Note2)	
3.	Permanent Account Number		
4.	Tax Deduction and Collection Account Number		
5.	Email id		
6.	Contact number	Country Code	Number
7.	Tax year		
8.	Quarter of tax year		
Details of the collectee			
9.	Name	(refer Note 1)	
10.	Address	(refer Note2)	
11.	Permanent Account Number		

PART B

Summary of receipt				
Sl. No.	Amount received/debited	Nature of receipt	Date of receipt/debit (dd/mm/yyyy)	
Total				
Summary of tax collected at source in respect of the collectee				
Quarter	Receipt Numbers of original quarterly statements of TCS under section 397(3)(b)	Amount of tax collected	Rate at which tax is collected at source	Amount of tax deposited/adjusted

PART C

I. Details of tax collected and deposited in the central government account through book adjustment (The Collector to provide payment wise details of tax collected and deposited with respect to the collectee)					
Sl. No.	Tax deposited (refer Note 5)	Book Identification Number (BIN)			
		Receipt numbers of Form No. 137	DDO serial number in Form No. 137	Date of Transfer voucher (dd/mm/yyyy)	Status of Matching with Form No. 137
Total					
II. Details of tax collected and deposited in the central government account through challan					

(The Collector to provide payment wise details of tax collected and deposited with respect to the collectee)					
Sl. No.	Tax deposited (refer Note 5)	Challan Identification Number (CIN)			
		BSR Code of the Bank Branch	Date on which tax deposited (dd/mm/yyyy)	Challan Serial Number	Status of matching with TIN 2.0
Total					

DECLARATION

I,, (name of person responsible for collection of tax)..... having Permanent Account Number working in the capacity as (designation) of (name of the collector) do hereby certify that a sum of ₹ [₹.....(in words)] has been collected and deposited to the credit of the Central Government.

I further certify that the information given above is true, complete and correct and is based on the books of account, documents, TCS statements, TCS deposited and other available records.

Place:

Signature of person responsible for collection of tax

Date:

Name:

Designation:

Notes:

1. In case of individual, the first, middle and last name shall be provided in full without any abbreviations. In any other case also, name shall be provided in full.
2. The address shall contain i. Country/Region, ii. Flat/Door/Block number iii. Road/Street/Block/Sector, iv. PIN/ZIP Code, v. Post Office, vi. Area/locality, vii. District, viii. State.
3. Government collectors to fill information in item I of Part C if tax is paid without production of an income-tax challan and in item II of Part C if tax is paid accompanied by an income-tax challan.
4. Non-Government collectors to fill information in item II of Part C.
5. In Part B, items I and II, in column for tax deposited, sum of tax collected, surcharge and health & education cess shall be provided.
6. Some of the information in the Form would be pre-filled to the extent possible.
7. Amounts to be filled in ₹ unless otherwise provided.