## FORM NO. 15CB [See rule 37BB]



Certificate of an accountant

## Acknowledgement Number -

We hereby certify the following:-

| -  |   |  |
|----|---|--|
| Α. | Name and address of the beneficiary of the remittance |  |

| В. | 1.  | Country to which remittance is made  |                                |
|----|-----|--|--------------------------------|
|    |     | Currency   |                                |
|    | 2.  | Amount Payable   |                                |
|    |     | In foreign currency  |                                |
|    |     | In Indian (₹)  |                                |
|    | 3.  | IFSC Code  |                                |
|    |     | Name of Bank   |                                |
|    |     | Branch of the bank   |                                |
|    | 4.  | BSR Code of the bank branch (7 digit)  |                                |
|    | 5.  | Name of Authorized Dealer  |                                |
|    |     | Branch Address of the authorized dealer  |                                |
|    | 6.  | Proposed date of remittance  |                                |
|    | 7.  | Nature of remittance as per agreement/document                                     |                                |
|    | 8.  | Please furnish relevant purpose code as per RBI                                    | Enter purpose code of transfer |
|    | 9.  | In case the remittance is net of taxes, whether tax payable has been grossed up    |                                |
|    | 10. | Taxability under the provisions of the Income-tax   Act (without considering DTAA) |                                |

|      | i. Is remittance chargeable to tax in India  |  |
|------|--|--|
|      | ii. If not reasons thereof   |  |
|      | iii. If yes, (a) the relevant section of the Act<br>under which the remittance is covered  |  |
|      | (b) The amount of income chargeable to tax   |  |
|      | (c) The tax liability  |  |
|      | (d) Basis of determining taxable income and tax liability  |  |
| 11.  | If income is chargeable to tax in India and any relief is claimed under DTAA   |  |
|      | i. Whether tax residency certificate is obtained from the recipient of remittance  |  |
|      | ii. Please specify relevant DTAA   |  |
|      | iii. Please specify relevant article of DTAA (Nature of payment as per DTAA)   |  |
|      | iv. Taxable income as per DTAA   |  |
|      | v. Tax liability as per DTAA   |  |
| 11.A | If the remittance is for royalties, fee for technical services, interest, dividend, etc, (not connected with permanent establishment), please indicate |  |
|      | a. Article of DTAA   |  |
|      | b. Rate of TDS required to be deducted in terms of such article of the applicable DTAA (%)   |  |
| 11.B | In case the remittance is on account of business income, please indicate   |  |
|      | a. The amount of income liable to tax in India   |  |
|      | b. The basis of arriving at the rate of deduction of tax   |  |
| 11.C | In case the remittance is on account of capital gains, please indicate   |  |
|      | a. Amount of long term capital gains   |  |
|      | b. Amount of short-term capital gains  |  |
|      | c. basis of arriving at taxable income   |  |
| 11D. | In case of other remittance not covered by sub-<br>items A, B and C  |  |

|     | a. Please specify nature of remittance   |  |
|-----|--|--|
|     | b. Whether taxable in India as per DTAA  |  |
|     | c. If yes, rate of TDS required to be deducted in terms of such article of the applicable DTAA (%) |  |
|     | d. If not, please furnish brief reasons thereof specifying relevant article of DTAA                |  |
| 12  | Amount of TDS  |  |
|     | In foreign currency  |  |
|     | In Indian (₹)  |  |
| 13. | Rate of TDS (%)  |  |
| 14. | Actual amount of remittance after TDS (In foreign currency)  |  |
| 15. | Date of deduction of tax at source, if any   |  |

| Accountant Name                   |  |
|-----------------------------------|--|
| Name of the proprietorship / firm |  |
| Membership Number                 |  |
| Address                           |  |
| Registration Number               |  |
| Place Date                        |  |
|                                   |  |
|                                   |  |
|                                   |  |

UDIN number is mandatory

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**UDIN Number**