#### "FORM NO. 60 [See second proviso to rule 114B]

Form for declaration to be filed by an individual or a person (not being a company or firm) who does not have a permanent
account number and who enters into any transaction specified in rule 114B

1	First Name														Dat	e of I	Birth/	Incor	porat	tion of	fdecl	arant				
	Midd Name																	2	D	D	М	М	Υ	Y	Υ	Y
	Surna	ame																								
											1			<u></u>	1		·			1	r	г	r	,, 	1	
3	Father's Name (in case of individual) Name																									
	Midd Name																									
	Surname																									
4	Flat/ Room No.						5	5 Floor No.							•											
6	Name	e of prem	iises							7	,	Block	Na	me/No.												
8	Road/ Street/ Lane					9	•	Area/ Locality																		
10	10 Town/ City					1	1	District 12 State																		
13	Pin c	ode			14	Т	eleph	one	Numb	oer (v	(with STD code) 15 Mobile Number															
16	Amo	unt of tra	insact	ion (F	Rs.)						In case of transaction in joint names, number of persons involved in the															
17	Date	of transa	ction		D		D	N	M	М	Ŋ	Č,	Y	Y	,	Y	transaction									
19	Mode	e of trans	actior	n: 🗆	Cash,	, 🗆	Cheq	ıe,	🗆 Ca	rd, l	D D	raft/Ba	nk	er's Che	que	, 🗆	Onli	ne tra	ansfe	r, □	Other	r				
20		aar Num	ber is	sued	by UI	DAI																				
21		olied for										D		D		М		М		Y		Y		Y		Y
21		of applic																								
22		N not ap. nancial y									g inc	ome of	f sp	pouse, m	inoi	chil	d etc	. as p	oer se	ction	64 of	Inco	me-ta	ax Act	, 196	1) for
	a Agricultural income (Rs.)																									
	b Other than agricultural income (Rs.)																									
23	23Details of document being produced in support of identify in Column 1 (Refer Instruction overleaf)Docume nt code						num	ıber		entificat		C	Name and address of the authority issuing the document													
24	Details of document being produced in Docume					Document identification         Name and addition           number         document				ame and address of the authority issuing the ocument																

Verification

I, \_\_\_\_\_\_\_\_\_ do hereby declare that what is stated above is true to the best of my knowledge and belief. I further declare that I do not have a Permanent Account Number and my/ our estimated total income (including income of spouse, minor child etc. as per section 64 of Income-tax Act, 1961) computed in accordance with the provisions of Income-tax Act, 1961 for the financial year in which the above transaction is held will be less than maximum amount not chargeable to tax. Verified today, the \_\_\_\_\_\_ day of \_\_\_\_\_\_ 20\_\_\_\_

(Signature of declarant)

#### Note:

Place:

- 1. Before signing the declaration, the declarant should satisfy himself that the information furnished in this form is true, correct and complete in all respects. Any person making a false statement in the declaration shall be liable to prosecution under section 277 of the Income-tax Act, 1961 and on conviction be punishable,-
  - (i) in a case where tax sought to be evaded exceeds twenty-five lakh rupees, with rigorous imprisonment which shall not be less than six months but which may extend to seven years and with fine;

- (ii) in any other case, with rigorous imprisonment which shall not be less than three months but which may extend to two years and with fine.
- 2. The person accepting the declaration shall not accept the declaration where the amount of income of the nature referred to in item 22b exceeds the maximum amount which is not chargeable to tax, unless PAN is applied for and column 21 is duly filled.

### Instruction:

(1) Documents which can be produced in support of identity and address (not required if applied for PAN and item 20 is filled): -

Sl.	Nat	ure of Document	Document	Proof of	Proof of	
			Code	Identity	Address	
Α	For	Individuals and HUF				
	1.	AADHAR card	01	Yes	Yes	
	2.	Bank/Post office passbook bearing photograph of the person	02	Yes	Yes	
	3.	Elector's photo identity card	03	Yes	Yes	
	4.	Ration/Public Distribution System card bearing photograph of	04	Yes	Yes	
		the person				
	5.	Driving License	05	Yes	Yes	
	6.	Passport	06	Yes	Yes	
	7.	Pensioner Photo card	07	Yes	Yes	
	8.	National Rural Employment Guarantee Scheme (NREGS) Job	08	Yes	Yes	
		card				
	9.	Caste or Domicile certificate bearing photo of the person	09	Yes	Yes	
	10.	Certificate of identity/address signed by a Member of Parliament	10	Yes	Yes	
		or Member of Legislative Assembly or Municipal Councillor or a				
		Gazetted Officer as per annexure A prescribed in Form 49A				
	11.	Certificate from employer as per annexure B prescribed in Form	11	Yes	Yes	
		49A				
	12.	Kisan passbook bearing photo	12	Yes	No	
	13.	Arm's license	13	Yes	No	
	14.	Central Government Health Scheme /Ex-servicemen	14	Yes	No	
		Contributory Health Scheme card				
	15.	Photo identity card issued by the government./ Public Sector	15	Yes	No	
		Undertaking				
	16.	Electricity bill (Not more than 3 months old)	16	No	Yes	
	17.	Landline Telephone bill (Not more than 3 months old)	17	No	Yes	
	18.	Water bill (Not more than 3 months old)	18	No	Yes	
	19.	Consumer gas card/book or piped gas bill (Not more than 3	19	No	Yes	
		months old)				
	20.	Bank Account Statement (Not more than 3 months old)	20	No	Yes	
	21.	Credit Card statement (Not more than 3 months old)	21	No	Yes	
	22.	Depository Account Statement (Not more than 3 months old)	22	No	Yes	
	23.	Property registration document	23	No	Yes	
	24.	Allotment letter of accommodation from Government	24	No	Yes	
	25.	Passport of spouse bearing name of the person	25	No	Yes	
	26.	Property tax payment receipt (Not more than one year old)	26	No	Yes	
B		Association of persons (Trusts)				
	Cop	y of trust deed or copy of certificate of registration issued by	27	Yes	Yes	
	Charity Commissioner					
С		Association of persons (other than Trusts) or Body of ividuals or Local authority or Artificial Juridical Person)				
		y of Agreement or copy of certificate of registration issued by	28	Yes	Yes	
		rity commissioner or Registrar of Cooperative society or any other				
		petent authority or any other document originating from any				
		tral or State Government Department establishing identity and				
		ress of such person.				

- (2) In case of a transaction in the name of a Minor, any of the above mentioned documents as proof of Identity and Address of any of parents/guardians of such minor shall be deemed to be the proof of identity and address for the minor declarant, and the declaration should be signed by the parent/guardian.
- (3) For HUF any document in the name of Karta of HUF is required.

(4) In case the transaction is in the name of more than one person the total number of persons should be mentioned in Sl. No. 18 and the total amount of transaction is to be filled in Sl. No. 16.

In case the estimated total income in column 22b exceeds the maximum amount not chargeable to tax the person should apply for PAN, fill out item 21 and furnish proof of submission of application.

#### FORM NO. 61

[See sub-rule (1) of rule 114D]

#### Statement containing particulars of declaration received in Form No. 60

#### PART A: STATEMENT DETAILS

(This information should be provided for each Statement submitted together)

A.1	REPORTING PERSON DET	TAILS
A.1.1	Reporting Person Name	
A.1.2	Income-tax Department Reporting Entity Identification Number	
A.1.3	Registration Number	
A.2	STATEMENT DETAILS	
A.2.1	Statement Type	Insert 2 character code
A.2.2	Statement Number	
A.2.3	Original Statement Id	
A.2.4	Reason for Correction	Insert 1 character code
A.2.5	Statement Date	
A.2.6	Reporting Period	
A.2.7	Number of Reports	
A.3	PRINCIPAL OFFICER DET	AILS
A.3.1	Officer Name	
A.3.2	Officer Designation	
A.3.2 A.3.3	Officer Designation Address	
	-	
A.3.3	Address	
A.3.3 A.3.4	Address City / Town	Insert 2 character code
A.3.3 A.3.4 A.3.5	Address City / Town Postal Code	Insert 2 character code
A.3.3 A.3.4 A.3.5 A.3.6	Address City / Town Postal Code State Code	Insert 2 character code
A.3.3 A.3.4 A.3.5 A.3.6 A.3.7	Address City / Town Postal Code State Code Country Code	Insert 2 character code
A.3.3 A.3.4 A.3.5 A.3.6 A.3.7 A.3.8	Address City / Town Postal Code State Code Country Code Telephone	Insert 2 character code

## PART B: REPORT DETAILS FOR FINANCIAL TRANSACTIONS

B.1	REPORT NUMBER (To be provide	ed for each person being reported)
B.1.1	Report Serial Number	
B.1.2	Original Report Serial Number	
B.2	PERSON DETAILS	
B.2.1	Person Name	
B.2.2	Date of birth/Incorporation	
B.2.3	Father's Name (for individuals)	
B.2.4	PAN Acknowledgement	
B.2.5	Aadhaar Number	
B.2.6	Address	
B.2.7	City / Town	
B.2.8	Postal Code	
B.2.9	State Code	Insert 2 character code
B.2.10	Country Code	Insert 2 character code
B.2.11	Mobile/Telephone Number	
B.2.12	Estimated agricultural income	
B.2.13	Estimated non-agricultural income	
B.2.14	Remarks	
B.3	FINANCIAL TRANSACTION SUM	MARY
B.3.1	Transaction Date	
B.3.2	Transaction ID	
B.3.3	Transaction Type	Insert 2 character code
B.3.4	Transaction Amount	
B.3.5	Transaction Mode	Insert 2 character code

#### FORM No. 61A

#### [See rule 114E]

#### Statement of Specified Financial Transactions under section 285BA(1) of the Income-tax Act, 1961

#### PART A: STATEMENTDETAILS

(This information should be provided for each Statement submitted together)

A.1	REPORTING ENTITY DET	AILS
A.1.1	Reporting Entity Name	
A.1.2	Income-tax Department Reporting Entity Identification Number	
A.1.3	Registration Number	
A.2	STATEMENT DETAILS	
A.2.1	Statement Type	Insert 2 character code
A.2.2	Statement Number	
A.2.3	Original Statement Id	
A.2.4	Reason for Correction	Insert 1 character code
A.2.5	Statement Date	
A.2.6	Reporting Period	
A.2.7	Report Types	, Insert 2 character codes
A.2.8	Number of Reports	
A.3	PRINCIPAL OFFICER DET	AILS
A.3.1	Name	
A.3.2	Designation	
A.3.3	Address	
A.3.4	City / Town	
A.3.5	Postal Code	
A.3.6	State Code	Insert 2 character code
A.3.7	Country Code	Insert 2 character code
A.3.8	Telephone	
A.3.9	Mobile	
A.3.10	Fax	
A.3.11	Email	

## PART B: REPORT DETAILS FOR AGGREGATED FINANCIAL TRANSACTIONS

B.1	REPORT NUMBER (To be provide	ed for each person being reported)
B.1.1	Report Serial Number	
B.1.2	Original Report Serial Number	
B.2	PERSON DETAILS	
B.2.1	Person Name	
B.2.2	Person Type	Insert 2 character code
B.2.3	Customer Identity	
B.2.4	Gender (for individuals)	Insert 1 character code
B.2.5	Father's Name (for individuals)	
B.2.6	PAN	
B.2.7	Aadhaar Number (for individuals)	
B.2.8	Form 60 Acknowledgment	
B.2.9	Identification Type	Insert 1 character code
B.2.10	Identification Number	
B.2.11	Date of birth/Incorporation	
B.2.12	Nationality/Country of Incorporation	Insert 2 character code
B.2.13	Business or occupation	
B.2.14	Address	
B.2.15	Address Type	Insert 1 character code
B.2.16	City / Town	
B.2.17	Postal Code	
B.2.18	State Code	Insert 2 character code
B.2.19	Country Code	Insert 2 character code
B.2.20	Mobile/Telephone Number	
B.2.21	Other Contact Number	
B.2.22	Email	
B.2.23	Remarks	
B.3	FINANCIAL TRANSACTION SUMM	IARY
B.3.1	Product Type	Insert 2 character code
B.3.2	Aggregate gross amount received from the person	
B.3.3	Aggregate gross amount received from the person in cash	
B.3.4	Aggregate gross amount paid to the person	

B.3.5	Remarks	
B.4	FINANCIAL PRODUCT DETAILS	(To be provided for each distinctive product)
B.4.1	Product Identifier	
B.4.2	Last Date of Transaction	
B.4.3	Aggregate gross amount received from the person	
B.4.4	Aggregate gross amount received from the person in cash	
B.4.5	Aggregate gross amount paid to the person	
B.4.6	Related Account Number	
B.4.7	Related Institution Name	
B.4.8	Related Institution Ref Number	
B.4.9	Remarks	

#### PART C: REPORT DETAILS FOR BANK/POST OFFICE ACCOUNT

#### (This information should be provided for each Account being reported)

C.1	REPORT NUMBER (To be provide	d for each account being reported)
C.1.1	Report Serial Number	
C.1.2	Original Report Serial Number	
C.2	ACCOUNT DETAILS	
C.2.1	Account Type	Insert 2 character code
C.2.2	Account Number	
C.2.3	Account Holder Name	
C.2.4	Account Status	Insert 1 character code
C.2.5	Branch Reference Number	
C.2.6	Branch Name	
C.2.7	Branch Address	
C.2.8	City Town	
C.2.9	Postal Code	
C.2.10	State Code	Insert 2 character code
C.2.11	Country Code	Insert 2 character code
C.2.12	Telephone	
C.2.13	Mobile	
C.2.14	Fax	
C.2.15	Email	
C.2.16	Remarks	
C.3	ACCOUNT SUMMARY	
C.3.1	Aggregate gross amount credited to the account in cash	
C.3.2	Aggregate gross amount debited to the account in cash	
C.3.3	Remarks	
C.4	PERSON DETAILS (To be provide	ed for each person related to the account)
C.4.1	Account Relationship	Insert 1 character code
C.4.2	Person Name	
C.4.3	Person Type	Insert 2 character code
C.4.4	Customer Identity	
C.4.5	Gender (for individuals)	Insert 1 character code
C.4.6	Father's Name (for individuals)	
C.4.7	PAN	
C.4.8	Aadhaar Number (for individuals)	

C.4.9	Form 60 Acknowledgment	
C.4.10	Identification Type	Insert 1 character code
C.4.11	Identification Number	
C.4.12	Date of birth/Incorporation	
C.4.13	Nationality/Country of Incorporation	Insert 2 character code
C.4.14	Business or occupation	
C.4.15	Address	
C.4.16	Address Type	Insert 1 character code
C.4.17	City / Town	
C.4.18	Postal Code	
C.4.19	State Code	Insert 2 character code
C.4.20	Country Code	Insert 2 character code
C.4.21	Mobile/Telephone Number	
C.4.22	Other Contact Number	
C.4.23	Email	
C.4.24	Remarks	

#### PART D: REPORT DETAILS FOR IMMOVABLE PROPERTY TRANSACTIONS

(This information should be provided for each Transaction being reported)

D.1	REPORT NUMBER (To be provide	ed for each transaction being reported)
D.1.1	Report Serial Number	
D.1.2	Original Report Serial Number	
D.2	TRANSACTION DETAILS	
D.2.1	Transaction Date	
D.2.2	Transaction Identity	
D.2.3	Transaction Type	Insert 1 character code
D.2.4	Transaction Amount	
D.2.5	Property Type	Insert 1 character code
D.2.6	Whether property is within municipal limits	Insert 1 character code
D.2.7	Property Address	
D.2.8	City / Town	
D.2.9	Postal Code	
D.2.10	State Code	Insert 2 character code
D.2.11	Country Code	Insert 2 character code
D.2.12	Stamp Value	
D.2.13	Remarks	
D.3	PERSON DETAILS (To be provide	d for each person related to the transaction)
D.3.1	Transaction Relation	Insert 2 character code
D.3.2	Transaction Amount related to the person	
D.3.3	Person Name	
D.3.4	Person Type	Insert 2 character code
D.3.5	Gender (for individuals)	Insert 1 character code
D.3.6	Father's Name (for individuals)	
D.3.7	PAN	
D.3.8	Aadhaar Number (for individuals)	
D.3.9	Form 60 Acknowledgment	
D.3.10	Identification Type	Insert 1 character code
D.3.11	Identification Number	
D.3.12	Date of birth/Incorporation	
D.3.13	Nationality/Country of Incorporation	Insert 2 character code

D.3.14	Address	
D.3.15	City / Town	
D.3.16	Postal Code	
D.3.17	State Code	Insert 2 character code
D.3.18	Country Code	Insert 2 character code
D.3.19	Mobile/Telephone Number	
D.3.20	Other Contact Number	
D.3.21	Email	
D.3.22	Remarks".	

# [Notification No. 95/2015][F.No.142/28/2012-(SO)TPL]

[Ekta Jain] Deputy Secretary to Government of India

Note:- The principal rules were published vide notification S.O. 969 (E), dated the 26<sup>th</sup> March, 1962 and last amended vide notification GSR 978E, dated the 16<sup>th</sup> December, 2015.

## Instructions to Form 61

The requirement field for each data element indicates whether the element is validation or optional in the schema.

Validation	"Validation" elements MUST be present for ALL data records in a file and an automated validation check will be undertaken. The Sender should do a technical check of the data file content using XML tools to make sure all "Validation" elements are present and if they are not, the sender should correct the file. The Income-tax Department will also do so and if incorrect, will reject the file.
(Optional) Mandatory	(Optional) Mandatory data element is not required for schema validation but is required for reporting depending on availability of information or other factors. These elements may be present in most (but not all) circumstances, so the validation will be based rule based.
Optional An optional element specified in form. May be reported if available.	

#### **Specific Instructions**

S. No.	Element	Description	Requirement
A.1.1	Reporting Person Name	Complete name of the reporting person.	Validation
A.1.2	ITDREIN (Income-tax Department Reporting Entity Identification Number)	ITDREIN is the Unique ID issued by ITD which will be communicated by ITD after the registration of the reporting entity with ITD. The ITDREIN is a 16-character identification number in the format XXXXXXXXXXYYYYY where XXXXXXXXX is the PAN or TAN of the reporting entity and YYYYY is a sequentially generated number. The reporting Entity may use a dummy number (PAN+99999 or TAN+99999) till the ITDREIN is communicated.	Validation
A.1.3	Registration Number	This number is the registration number or any number used in correspondence with the regulator of the financial institution. This number will be used during verification of the registration of the reporting entity and in correspondence with the regulators.	(Optional) Mandatory
A.2.1	Statement Type	<ul> <li>Type of Statement submitted. Permissible values are:</li> <li>NB – New Statement containing new information</li> <li>CB – Correction Statement containing corrections for previously submitted information</li> <li>TD - Test Data</li> <li>ND - No Data to report</li> <li>One Statement can contain only one type of Statement. Even if missing information has to be supplied, the complete report has to be submitted instead of an incremental report.</li> </ul>	Validation
A.2.2	Statement Number	Statement Number is a free text field capturing the sender's unique identifying number (created by the sender) that identifies the particular Statement being sent. The identifier allows both the sender and receiver to identify the specific Statement later if questions or corrections arise. After successful submission of the Statement to ITD, a new unique Statement ID will be allotted for future reference. The reporting entities should maintain the linkage between the Statement Number and Statement ID. Example of the statement number is 2015/01.	Validation
A.2.3	Original Statement Id	Statement ID of the original Statement which is being replaced deleted or referred by reports in the current Statement. In case the Statement is new and unrelated to any previous Statement, mention '0' here.	Validation

S. No.	Element	Description	Requirement
A.2.4	Reason of Correction	<ul> <li>Reason for revision to be stated when the original Statement is corrected.</li> <li>Permissible values are:</li> <li>A - Acknowledgement of original Statement had many errors which are being resolved</li> <li>B - Errors in original Statement are being corrected suo-motu</li> <li>C - The correction report is on account of additional information being submitted</li> <li>N - Not applicable as this is a new statement/test data/ there is no data to report</li> <li>Z - Other reason</li> </ul>	Validation
A.2.5	Statement Date	This identifies the date and time when the Statement was compiled. This element will be automatically populated by the host system. The format for use is YYYY-MM-DD hh:mm:ss. Fractions of seconds is not used. Example: 2016-03-15T09:45:30.	Validation
A.2.6	Reporting Period	This identifies the reporting period in YYYY-MM-DD format. For example, if reporting information for the declaration received between 01-04-2016 to 30-06-2016, the field would read, "2016-04-01 to 2016-06-30"	Validation
A.2.7	Number of Reports	Number of Reports contained in Part B of the Statement.	Validation
A.3.1	Designated Director/Nodal Officer Name	Name of the Designated Director or Nodal officer of the statement filer.	Validation
A.3.2	Designated Director/Nodal Officer Designation	Designation of the Designated Director or Nodal Officer in the organisation of statement filer.	Validation
A.3.3	Address	Complete address of the nodal officer consisting of house number, building name, street, locality, city, state, Postal Code and country.	Validation
A.3.4	City Town	Name of City, Town or Village	Validation
A.3.5	Postal Code	In case of India, the 6 digit Pin code as India Posts has to be mentioned. In case of countries outside, respective code may be used. If Pin code is not available, use XXXXXX.	Validation
A.3.6	State Code	The two digit state code has to be mentioned as per Indian Motor Vehicle Act 1988. If state code is not available, use XX.	Validation
A.3.7	Country Code	The Country Code as per ISO 3166 has to be mentioned. As IN for India. If Country Code is not available, use XX	Validation
A.3.8	Telephone	Telephone number in format STD Code-Telephone number. (Example 0120-2894016)	Validation
A.3.9	Mobile	Contact Mobile number. Please do not add "0" before the number	Validation
A.3.10	Fax	Fax number in format STD Code-Telephone number. (Example 0120-2894016)	Optional
A.3.11	Email	E-mail of the nodal officer	Validation
Part B	Details of Financial Transactions	This part is to be reported for financial transactions	
B.1.1	Report Serial Number	The number uniquely represents a report within a Statement. The Report Serial Number should be unique within the Statement. This number along with Statement ID will uniquely identify any report received by ITD.	Validation
B.1.2	Original Report Serial Number	The Report Serial Number of the original report that has to be replaced or deleted. This number along with Original Statement ID will uniquely identify the report which is being corrected. In case there is no correction of any report, mention '0' here.	Validation
B.2.1	Person Name	Name of the individual or entity.	Validation

S. No.	Element	Description	Requirement
B.2.2	Date of birth/Incorporation	Individual: Actual Date of Birth; Company: Date of incorporation; Association of Persons: Date of formation/creation; Trusts: Date of creation of Trust Deed; Partnership Firms: Date of Partnership Deed; LLPs: Date of incorporation/Registration; HUFs: Date of creation of HUF and for ancestral HUF date can be 01-01-0001 where the date of creation is not available. The data format is DD/MM/YYYY Mandatory if valid PAN is not reported.	Validation
B.2.3	Father's Name (for individuals)	Name of the father.	Validation
B.2.4	PAN Acknowledgement	If applied for PAN, the acknowledgement number for the same.	(Optional) Mandatory
B.2.5	Aadhaar Number	Aadhaar Number of the person.	(Optional) Mandatory
B.2.6	Identification type	The type of identification produced in support of identity. Permissible values are: 01- AADHAR card 02-Bank/Post office passbook bearing photograph of the person 03-Elector's photo identity card 04-Ration/PDS card bearing photograph of the person 05-Driving License 06-Passport 07-Pensioner Photo card 08-NREGS Job card 09-Caste or Domicile certificate bearing photo of the person 10-Certificate of identity/address signed by a Member of Parliament or Member of Legislative Assembly or Municipal Councillor or a Gazetted Officer as per annexure A prescribed in Form 49A 11-Certificate from employer as per annexure B prescribed in Form 49A 12-Kisan passbook bearing photo 13-Arm's license 14-CGHS/ECHS card 15-Photo identity card issued by the govt./PSU 16- Copy of trust deed or copy of certificate of registration issued by Charity Commissioner 17-Copy of Agreement or copy of certificate of registration issued by Charity commissioner or Registrar of Cooperative society or any other competent authority or any other document originating from any Central or State Government Department establishing identity and address of such person.	Validation
B.2.7	Identification number	The Identification number of the document produced in support of identity	Validation
B.2.8	Address	Complete address of the person consisting of house number, building name, street, locality, city, state, Postal Code and country.	Validation
B.2.9	City / Town	Name of City, Town or Village	(Optional) Mandatory
B.2.10	Postal Code	In case of India, the 6 digit Pin code as per India Posts has to be mentioned. In case of countries outside India, respective code may be used. If Pin code is not available, use XXXXXX.	Validation
B.2.11	State Code	The two digit state code has to be mentioned as per Indian Motor Vehicle Act 1988. If state code is not available, use XX.	Validation
B.2.12	Country Code	The Country Code as per ISO 3166 has to be mentioned. Use IN for India. If Country Code is not available, use XX	Validation
B.2.13	Mobile/Telephone Number	Primary Telephone (STD Code-Telephone number) or mobile number (if available)	(Optional) Mandatory

S. No.	Element	Description	Requirement
B.2.14	Estimated agricultural income	Estimated agricultural income during the financial year	(Optional) Mandatory
B.2.15	Estimated non- agricultural income	Estimated non-agricultural income during the financial year	Validation
B.2.16	Remarks	Remarks or any other information	Optional
B.3.1	Transaction Date	Date of transaction. The data format is DD/MM/YYYY	Validation
B.3.2	Transaction ID	Unique ID to identify transaction, if any, maintained by the reporting person	(Optional) Mandatory
B.3.3	Transaction Type	Permissible values are: 01-Sale of immovable property 02-Purchase of immovable property 03-Sale of a motor vehicle 04-Purchase of motor vehicle 05-Investment in Time deposit 06-Deposit in cash 07-Sale of securities 08-Purchase of securities 09-Opening an account (other than savings and time deposit) 10-Account with balance exceeding Rs. 50,000 11-Purchase of bank drafts or pay orders 12-Application for issue of a credit or debit card 13-Payment to hotel 14-payment in connection with travel to any foreign country 15-payment for purchase, or remittance outside India, 16-Payment to Mutual Fund for purchase of its units 17-Payment for acquiring shares 18-Payment as life insurance premium 20-Sale of shares of a company 21-Purchase of shares of company 22-Not classified above	Validation
B.3.4	Transaction Amount	Amount of transaction as per registered deed. The amount should be rounded off to nearest rupee without decimal. If this amount is not in Indian Rupees, then convert to Indian Rupees.	Validation
B.3.5	Transaction Mode	Permissible values are: 01-Cash 02-Cheue 03-Card 04-Draft/Bankers Cheque 05-Online transfers 06-Others	Validation

### Instructions to Form 61A

The requirement field for each data element indicates whether the element is validation or optional in the schema.

Validation	"Validation" elements MUST be present for ALL data records in a file and an automated validation check will be undertaken. The Sender should do a technical check of the data file content using XML tools to make sure all "Validation" elements are present and if they are not, the sender should correct the file. The Income-tax Department will also do so and if incorrect, will reject the file.
(Optional) Mandatory	(Optional) Mandatory data element is not required for schema validation but IS required for reporting depending on availability of information or other factors. These elements may be present in most (but not all) circumstances, so the validation will be based rule based.
Optional	An optional element specified in form. May be reported if available.

## **Specific Instructions**

S. No.	Element	Description	Requirement
A.1.1	Reporting Entity Name	Complete name of the reporting entity.	Validation
A.1.2	ITDREIN (Income-tax Department Reporting Entity Identification Number)	ITDREIN is the Unique ID issued by ITD which will be communicated by ITD after the registration of the reporting entity with ITD. The ITDREIN is a 16-character identification number in the format XXXXXXXXXXXYYYYY where XXXXXXXXXX is the PAN or TAN of the reporting entity and YYYYY is a sequentially generated number. The reporting Entity may use a dummy number (PAN+99999 or TAN+99999) till the ITDREIN is communicated.	Validation
A.1.3	Registration Number	This number is the registration number or any number used in correspondence with the regulator of the financial institution. This number will be used during verification of the registration of the reporting entity and in correspondence with the regulators.	(Optional) Mandatory
A.2.1	Statement Type	<ul> <li>Type of Statement submitted. Permissible values are:</li> <li>NB – New Statement containing new information</li> <li>CB – Correction Statement containing corrections for previously submitted information</li> <li>TD - Test Data</li> <li>ND - No Data to report</li> <li>One Statement can contain only one type of Statement. Even if missing information has to be supplied, the complete report has to be submitted instead of an incremental report.</li> </ul>	Validation
A.2.2	Statement Number	Statement Number is a free text field capturing the sender's unique identifying number (created by the sender) that identifies the particular Statement being sent. The identifier allows both the sender and receiver to identify the specific Statement later if questions or corrections arise. After successful submission of the Statement to ITD, a new unique Statement ID will be allotted for future reference. The reporting entities should maintain the linkage between the Statement Number and Statement ID. Example of the statement number is 2015/01.	Validation
A.2.3	Original Statement Id	Statement ID of the original Statement which is being replaced deleted or referred by reports in the current Statement. In case the Statement is new and unrelated to any previous Statement, mention '0' here.	Validation

S. No.	Element	Description	Requirement
A.2.4	Reason of Correction	<ul> <li>Reason for revision to be stated when the original Statement is corrected.</li> <li>Permissible values are:</li> <li>A - Acknowledgement of original Statement had many errors which are being resolved</li> <li>B - Errors in original Statement are being corrected suo-motu</li> <li>C - The correction report is on account of additional information being submitted</li> <li>N - Not applicable as this is a new statement/test data/ there is no data to report</li> <li>Z - Other reason</li> </ul>	Validation
A.2.5	Statement Date	This identifies the date and time when the Statement was compiled. This element will be automatically populated by the host system. The format for use is YYYY-MM-DD hh:mm:ss. Fractions of seconds is not used. Example: 2016-03- 15T09:45:30.	Validation
A.2.6	Reporting Period	This identifies the last day of the reporting period in YYYY-MM-DD format. For example, if reporting information for the accounts or payments made in calendar year 2015, the field would read, "2015-12-31"	Validation
A.2.7	Report Type	Types of reports contained in the Statement. Permissible value are: AF- Aggregated Financial Transactions BA – Bank/Post Office Account IM - Immovable Property Transactions CB - Cross Border Transactions	Validation
A.2.8	Number of Reports	Number of Reports in the Statement.	Validation
A.3.1	Designated Director Name	Name of the Designated Director. Refer to the registration requirement under section 285BA of the Income-tax Act and Rule 114E(7) of the Income-tax Rule	Validation
A.3.2	Designated Director Designation	Designation of the Designated Director in the organisation of statement filer.	Validation
A.3.3	Address	Complete address of the nodal officer consisting of house number, building name, street, locality, city, state, Postal Code and country.	Validation
A.3.4	City Town	Name of City, Town or Village	Validation
A.3.5	Postal Code	In case of India, the 6 digit Pin code as per India Posts has to be mentioned. In case of countries outside India, respective code may be used. If Pin code is not available, use XXXXXX.	Validation
A.3.6	State Code	The two digit state code has to be mentioned as per Indian Motor Vehicle Act 1988. If state code is not available, use XX.	Validation
A.3.7	Country Code	The Country Code as per ISO 3166 has to be mentioned. Use IN for India. If Country Code is not available, use XX	Validation
A.3.8	Telephone	Telephone number in format STD Code-Telephone number. (Example 0120-2894016)	Validation
A.3.9	Mobile	Contact Mobile number. Please do not add "0" before the number	Validation
A.3.10	Fax	Fax number in format STD Code-Telephone number. (Example 0120-2894016)	Optional
A.3.11	Email	E-mail of the nodal officer	Validation
Part B	Details of Aggregated Financial Transactions	This part is to be reported for financial transactions in Time deposits, Credit cards, Mutual funds, Bonds/debenture, Share issue/buyback, Sale of foreign currency.	

S. No.	Element	Description	Requirement
B.1.1	Report Serial Number	The number uniquely represents a report within a Statement. The Report Serial Number should be unique within the Statement. This number along with Statement ID will uniquely identify any report received by ITD.	Validation
B.1.2	Original Report Serial Number	The Report Serial Number of the original report that has to be replaced or deleted. This number along with Original Statement ID will uniquely identify the report which is being corrected. In case there is no correction of any report, mention '0' here.	Validation
B.2.1	Person Name	Name of the individual or entity.	Validation
B.2.2	Person Type	The permissible values are: IN - Individual SP- Sole Proprietorship PF- Partnership Firm HF - HUF CR - Private Limited Company CB - Public Limited Company SO - Society AO - Association of persons/Body of individuals TR - Trust LI - Liquidator LL - LLP ZZ - Others XX – Not Categorised	Validation
B.2.3	Customer ID	Customer ID/Number allotted by the reporting entity (if available)	(Optional) Mandatory
B.2.4	Gender (for individuals)	Permissible values are: M - Male F - Female O – Others N – Not Applicable (for entities) X – Not Categorised	Validation
B.2.5	Father's Name (for individuals)	Name of the father (if available). Mandatory if valid PAN is not reported.	(Optional) Mandatory
B.2.6	PAN	Permanent Account Number issued by Income Tax Department	(Optional) Mandatory
B.2.7	Aadhaar Number (for individuals)	Aadhaar number issued by UIDAI (if available).	(Optional) Mandatory
B.2.8	Form 60 Acknowledgment	Form 60 Acknowledgment number, if applicable	(Optional) Mandatory
B.2.9	Identification Type	Document submitted as proof of identity of the individual. Permissible values are: A - Passport B - Election Id Card C - PAN Card D - ID Card issued by Government/PSU E - Driving License G - UIDAI Letter / Aadhaar Card H - NREGA job card Z - Others Mandatory if valid PAN is not reported.	(Optional) Mandatory
B.2.10	Identification Number	Number mentioned in the identification document Mandatory if valid PAN is not reported.	(Optional) Mandatory

S. No.	Element	Description	Requirement
B.2.11	Date of birth/Incorporatio n	Individual: Actual Date of Birth; Company: Date of incorporation; Association of Persons: Date of formation/creation; Trusts: Date of creation of Trust Deed; Partnership Firms: Date of Partnership Deed; LLPs: Date of incorporation/Registration; HUFs: Date of creation of HUF and for ancestral HUF date can be 01-01-0001 where the date of creation is not available. The data format is DD/MM/YYYY Mandatory if valid PAN is not reported.	(Optional) Mandatory
B.2.12	Nationality/Count ry of Incorporation	2 character Country Code (ISO 3166)	(Optional) Mandatory
B.2.13	Business or occupation	Business or occupation (if available)	Optional
B.2.14	Address	Complete address of the person consisting of house number, building name, street, locality, city, state, Postal Code and country.	Validation
B.2.15	Address Type	Indicates the legal character of the address. Permissible values are: 1- Residential Or Business 2 - Residential 3 - Business 4 - Registered Office 5 - Unspecified	Optional
B.2.16	City / Town	Name of City, Town or Village	(Optional) Mandatory
B.2.17	Postal Code	In case of India, the 6 digit Pin code as per India Posts has to be mentioned. In case of countries outside India, respective code may be used. If Pin code is not available, use XXXXXX.	Validation
B.2.18	State Code	The two digit state code has to be mentioned as per Indian Motor Vehicle Act 1988. If state code is not available, use XX.	Validation
B.2.19	Country Code	The Country Code as per ISO 3166 has to be mentioned. Use IN for India. If Country Code is not available, use XX	Validation
B.2.20	Mobile/Telephon e Number	Primary Telephone (STD Code-Telephone number) or mobile number (if available)	(Optional) Mandatory
B.2.21	Other Contact Number	Other Telephone (STD Code-Telephone number) or mobile number	Optional
B.2.22	Email	Email Address (if available)	(Optional) Mandatory
B.2.23	Remarks	Remarks or any other information	Optional
B.3.1	Product Type	Type of product linked with the transaction. Permissible values are: BD - Bonds or Debentures CC- Credit Card FC - Foreign Currency sale MF- Mutual Fund SI – Shares issued SB– Shares bought back TD- Time Deposit XX - Unspecified	(Optional) Mandatory
B.3.2	Aggregate gross amount received from the person	Aggregate gross amount received from the person (including in cash, if any) during the period	(Optional) Mandatory
B.3.3	Aggregate gross amount received from the person in cash	Aggregate gross amount received from the person in cash during the period	(Optional) Mandatory

S. No.	Element	Description	Requirement
B.3.4	Aggregate gross amount paid to the person	Aggregate gross amount paid to the person during the period	(Optional) Mandatory
B.3.5	Related Account Number	Account number (if available) from/to which funds was transferred.	Optional
B.3.6	Related Institution Name	Name of the institution (if available) from / to which funds were transferred.	Optional
B.3.7	Related Institution Ref Number	Institution reference number of the institution (if available) from / to which funds were transferred.	Optional
B.3.8	Remarks	Remarks or any other information	Optional
B.4.1	Product Identifier	Unique identifier to identify the product. E.g. Time deposit number, credit card number etc.	(Optional) Mandatory
B.4.2	Last Date of Transaction	Last Date of Transaction for the product	
B.4.3	Aggregate gross amount received from the person	Aggregate gross amount paid by the person during the period	(Optional) Mandatory
B.4.4	Aggregate gross amount received from the person in cash	Aggregate gross amount paid by the person in cash during the period	(Optional) Mandatory
B.4.5	Aggregate gross amount paid to the person	Aggregate gross amount paid to the person during the period	(Optional) Mandatory
B.4.6	Related Account Number	Account number (if available) from/to which funds was transferred.	Optional
B.4.7	Related Institution Name	Name of the institution (if available) from / to which funds were transferred.	Optional
B.4.8	Related Institution Ref Number	Institution reference number of the institution (if available) from / to which funds were transferred.	Optional
B.4.9	Remarks	Remarks or any other information	Optional
Part C	Details of Bank/Post Office Account	This part is to be reported for bank account or post office account in which cash deposit or withdrawal above the prescribed threshold is made.	
C.1.1	Report Serial Number	The number uniquely represents a report within a Statement. The Report Serial Number should be unique within the Statement. This number along with Statement ID will uniquely identify any report received by ITD.	Validation
C.1.2	Original Report Serial Number	The Report Serial Number of the original report that has to be replaced or deleted. This number along with Original Statement ID will uniquely identify the report which is being corrected. In case there is no correction of any report, mention '0' here.	Validation
C.2.1	Account Type	Type of account. Permissible values are: BS - Savings Account BC - Current Account XX - Not Categorised	Validation
C.2.2	Account Number	Provide the account number used by the financial institution to identify the account. If the financial institution does not have an account number then provide the functional equivalent unique identifier used by the financial institution to identify the account.	Validation
C.2.3	Account Holder Name	Name of first/sole account holder.	Validation

S. No.	Element	Description	Requirement
C.2.4	Account Status	<ul> <li>Status of the account. Permissible values are:</li> <li>A – Active: Account is in regular use</li> <li>C - Closed: Account is closed during the financial year</li> <li>Z - Others: Not listed above</li> <li>X - Not categorized: The information is not available.</li> </ul>	Validation
C.2.5	Branch Reference Number	The unique number (IFSC code etc.) to uniquely identify the branch. Reporting Financial Institution can use self-generated numbers to uniquely identify the branch.	Validation
C.2.6	Branch Name	Name of Branch linked to the account. This could be the home or linked branch.	Validation
C.2.7	Branch Address	Complete address of the branch consisting of house number, building name, street, locality, city, state, Postal Code and country.	Validation
C.2.8	City / Town	Name of City, Town or Village	(Optional) Mandatory
C.2.9	Postal Code	In case of India, the 6 digit Pin code as per India Posts has to be mentioned. In case of countries outside India, respective code may be used. If Pin code is not available, use XXXXXX.	Validation
C.2.1 0	State Code	The two digit state code has to be mentioned as per Indian Motor Vehicle Act 1988. If state code is not available, use XX.	Validation
C.2.1 1	Country Code	The Country Code as per ISO 3166 has to be mentioned. Use IN for India. If Country Code is not available, use XX	Validation
C.2.1 2	Telephone	Telephone number in format STD Code-Telephone number. (Example 0120-2894016)	Validation
C.2.1 3	Mobile	Contact Mobile number. Please do not add "0" before the number	Validation
C.2.1 4	Fax	Fax number in format STD Code-Telephone number. (Example 0120-2894016)	Optional
C.2.1 5	Email	E-mail of the Branch head	Validation
C.2.1 6	Remarks	Remarks or any other information	Optional
C.3.1	Aggregate gross amount credited to the account in cash	Aggregate gross amount credited to the account in cash during the period.	Validation
C.3.2	Aggregate gross amount debited to the account in cash	Aggregate gross amount debited to the account in cash during the period.	Validation
C.3.3	Remarks	Remarks or any other information	Optional
C.4.1	Account Relationship	Permissible values for Relationship type are: F - First/Sole Account Holder S - Second Account Holder T - Third Account Holder A - Authorised Signatory C - Controlling Person Z - Others X - Not Categorised	Validation
C.4.2	Person Name	Name of the individual or entity.	Validation

S. No.	Element	Description	Requirement
C.4.3	Person Type	The permissible values are: IN - Individual SP- Sole Proprietorship PF- Partnership Firm HF - HUF CR - Private Limited Company CB - Public Limited Company SO - Society AO - Association of persons/Body of individuals TR - Trust LI - Liquidator LL - LLP ZZ - Others XX - Not Categorised	Validation
C.4.4	Customer ID	Customer ID/Number allotted by the reporting entity (if available)	(Optional) Mandatory
C.4.5	Gender (for individuals)	Permissible values are: M - Male F - Female O – Others N – Not Applicable (for entities) X – Not Categorised	Validation
C.4.6	Father's Name (for individuals)	Name of the father (if available). Mandatory if valid PAN is not reported.	(Optional) Mandatory
C.4.7	PAN	Permanent Account Number issued by Income Tax Department	(Optional) Mandatory
C.4.8	Aadhaar Number (for individuals)	Aadhaar number issued by UIDAI (if available).	(Optional) Mandatory
C.4.9	Form 60 Acknowledgment	Form 60 Acknowledgment number, if applicable	(Optional) Mandatory
C.4.1 0	Identification Type	Document submitted as proof of identity of the individual. Permissible values are: A - Passport B - Election Id Card C - PAN Card D - ID Card issued by Government/PSU E - Driving License G - UIDAI Letter / Aadhaar Card H - NREGA job card Z - Others Mandatory if valid PAN is not reported.	(Optional) Mandatory
C.4.1 1	Identification Number	Number mentioned in the identification document Mandatory if valid PAN is not reported.	(Optional) Mandatory
C.4.1 2	Date of birth/Incorporatio n	Individual: Actual Date of Birth; Company: Date of incorporation; Association of Persons: Date of formation/creation; Trusts: Date of creation of Trust Deed; Partnership Firms: Date of Partnership Deed; LLPs: Date of incorporation/Registration; HUFs: Date of creation of HUF and for ancestral HUF date can be 01-01-0001 where the date of creation is not available. The data format is DD/MM/YYYY Mandatory if valid PAN is not reported.	(Optional) Mandatory
C.4.1 3	Nationality/Count ry of Incorporation	2 character Country Code (ISO 3166)	(Optional) Mandatory
C.4.1 4	Business or occupation	Business or occupation (if available)	Optional
C.4.1 5	Address	Complete address of the person consisting of house number, building name, street, locality, city, state, Postal Code and country.	Validation

S. No.	Element	Description	Requirement
C.4.1 6	Address Type	Indicates the legal character of the address. Permissible values are: 1- Residential Or Business 2 - Residential 3 - Business 4 – Registered Office 5 – Unspecified	Optional
C.4.1 7	City / Town	Name of City, Town or Village	(Optional) Mandatory
C.4.1 8	Postal Code	In case of India, the 6 digit Pin code as per India Posts has to be mentioned. In case of countries outside India, respective code may be used. If Pin code is not available, use XXXXXX.	Validation
C.4.1 9	State Code	The two digit state code has to be mentioned as per Indian Motor Vehicle Act 1988. If state code is not available, use XX.	Validation
C.4.2 0	Country Code	The Country Code as per ISO 3166 has to be mentioned. Use IN for India. If Country Code is not available, use XX	Optional
C.4.2 1	Mobile/Telephon e Number	Primary Telephone (STD Code-Telephone number) or mobile number (if available)	(Optional) Mandatory
C.4.2 2	Other Contact Number	Other Telephone (STD Code-Telephone number) or mobile number	Optional
C.4.2 3	Email	Email Address (if available)	(Optional) Mandatory
C.4.2 4	Remarks	Remarks or any other information	Optional
Part D	Details for Immovable Property	This part is to be reported for Immovable property transactions	
D.1.1	Report Serial Number	The number uniquely represents a report within a Statement. The Report Serial Number should be unique within the Statement. This number along with Statement ID will uniquely identify any report received by ITD.	Validation
D.1.2	Original Report Serial Number	The Report Serial Number of the original report that has to be replaced or deleted. This number along with Original Statement ID will uniquely identify the report which is being corrected. In case there is no correction of any report, mention '0' here.	Validation
D.2.1	Transaction Date	Date of transaction. The data format is DD/MM/YYYY	Validation
D.2.2	Transaction ID	Unique ID to identify transaction, if available	(Optional) Mandatory
D.2.3	Transaction Type	Permissible values are: SP – Sale GF - Gift AG - Agreement to Sell PR - Partition ST - Settlement RL - Relinquishment of any right in the asset CA - Compulsory acquisition TP - Transfer as per the section 53A of the Transfer of Property Act, 1882(4 of 1882). SH - Transfer by acquisition of shares ZZ - Others XX - Not Categorized.	Validation
D.2.4	Transaction Amount	Amount of transaction as per registered deed. The amount should be rounded off to nearest rupee without decimal. If this amount is not in Indian Rupees, then convert to Indian Rupees.	Validation

S. No.	Element	Description	Requirement
D.2.5	Property Type	The asset underlying the transaction. Permissible values are: A - Agricultural land N - Non-agricultural land C - Commercial property R - Residential property I - Industrial Z - Others X - Not Categorized.	Validation
D.2.6	Whether property is within municipal limits	Permissible values are: Y - Yes N - No X - Not Categorized.	Validation
D.2.7	Property Address	Address of Property	(Optional) Mandatory
D.2.8	City / Town	Name of City, Town or Village	(Optional) Mandatory
D.2.9	Postal Code	In case of India, the 6 digit Pin code as per India Posts has to be mentioned. In case of countries outside India, respective code may be used. If Pin code is not available, use XXXXXX.	Validation
D.2.1 0	State Code	The two digit state code has to be mentioned as per Indian Motor Vehicle Act 1988. If state code is not available, use XX.	Validation
D.2.1 1	Country Code	The Country Code as per ISO 3166 has to be mentioned. Use IN for India. If Country Code is not available, use XX	Validation
D.2.1 2	Stamp Value	The value for stamp valuation is to be provided.	Validation
D.2.1 3	Remarks	Remarks or any other information	Optional
D.3.1	Transaction Relation	Relation of the person to the transaction. Permissible values are: S - Seller/Transferor B - Buyer/Transferee C - Confirming Party P - Power of Attorney holder Z - Others X - Not Categorized	Validation
D.3.2	Transaction Amount related to the person	Amount of transaction related to the person. The amount should be rounded off to nearest rupee without decimal. If this amount is not in Indian Rupees, then convert to Indian Rupees.	(Optional) Mandatory
D.3.3	Person Name	Name of the individual or entity.	Validation
D.3.4	Person Type	The permissible values are: IN - Individual SP- Sole Proprietorship PF- Partnership Firm HF - HUF CR - Private Limited Company CB - Public Limited Company SO - Society AO - Association of persons/Body of individuals TR - Trust LI - Liquidator LL - LLP ZZ - Others XX – Not Categorised	Validation

S. No.	Element	Description	Requirement
D.3.5	Gender (for individuals)	Permissible values are: M - Male F - Female O - Others N - Not Applicable (for entities) X - Not Categorised	Validation
D.3.6	Father's Name (for individuals)	Name of the father (if available). Mandatory if valid PAN is not reported.	(Optional) Mandatory
D.3.7	PAN	Permanent Account Number issued by Income Tax Department	(Optional) Mandatory
D.3.8	Aadhaar Number (for individuals)	Aadhaar number issued by UIDAI (if available).	(Optional) Mandatory
D.3.9	Form 60 Acknowledgment	Form 60 Acknowledgment number, if applicable	(Optional) Mandatory
D.3.1 0	Identification Type	Document submitted as proof of identity of the individual. Permissible values are: A - Passport B - Election Id Card C - PAN Card D - ID Card issued by Government/PSU E - Driving License G - UIDAI Letter / Aadhaar Card H - NREGA job card Z - Others Mandatory if valid PAN is not reported.	(Optional) Mandatory
D.3.1 1	Identification Number	Number mentioned in the identification document Mandatory if valid PAN is not reported.	(Optional) Mandatory
D.3.1 2	Date of birth/Incorporatio n	Individual: Actual Date of Birth; Company: Date of incorporation; Association of Persons: Date of formation/creation; Trusts: Date of creation of Trust Deed; Partnership Firms: Date of Partnership Deed; LLPs: Date of incorporation/Registration; HUFs: Date of creation of HUF and for ancestral HUF date can be 01-01-0001 where the date of creation is not available. The data format is DD/MM/YYYY Mandatory if valid PAN is not reported.	(Optional) Mandatory
D.3.1 3	Nationality/Count ry of Incorporation	2 character Country Code (ISO 3166)	(Optional) Mandatory
D.3.1 4	Address	Complete address of the person consisting of house number, building name, street, locality, city, state, Postal Code and country.	Validation
D.3.1 5	City / Town	Name of City, Town or Village	(Optional) Mandatory
D.3.1 6	Postal Code	In case of India, the 6 digit Pin code as per India Posts has to be mentioned. In case of countries outside India, respective code may be used. If Pin code is not available, use XXXXXX.	Validation
D.3.1 7	State Code	The two digit state code has to be mentioned as per Indian Motor Vehicle Act 1988. If state code is not available, use XX.	Validation
D.3.1 8	Country Code	The Country Code as per ISO 3166 has to be mentioned. Use IN for India. If Country Code is not available, use XX	Optional
D.3.1 9	Mobile/Telephon e Number	Primary Telephone (STD Code-Telephone number) or mobile number (if available)	(Optional) Mandatory
D.3.2 0	Other Contact Number	Other Telephone (STD Code-Telephone number) or mobile number	Optional
D.3.2 1	Email	Email Address (if available)	(Optional) Mandatory
D.3.2 2	Remarks	Remarks or any other information	Optional