

# Individual Advance Tax Payment Challan

Challan No.:

Date of Payment:

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

Assessment Year:

20\_\_\_\_ - 20\_\_\_\_

PAN:

Full Name:

Address:

Contact Number:

## Tax Payment Details

S. No.	Particulars	Amount (INR)
1	Income Tax	
2	Surcharge	
3	Education Cess	
4	Interest	
5	Penalty	
<b>Total</b>		

Bank Name & Branch:

Drawn on:

Mode of Payment:

[ ] Cash [ ] Cheque [ ] Demand Draft

Depositor's Signature:

Date:

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

## Important Notes:

- This challan must be filled in clearly and correctly to avoid processing delays.
- Ensure PAN and Assessment Year details are accurate before submission.
- Retain a copy of this challan as proof of payment for future reference.
- Mistakes or overwriting may render the challan invalid.
- For any queries, contact your assessing officer or refer to the Income Tax Department's official guidance.

