

## FORM NO. 10G

[ See rule 11AA ]

Application for grant of approval to fund or institution under clause (vi) of sub-section (5) of section 80G  
of the Income-tax Act, 1961

A. Details of Registered Office												
PAN		AACTD1711F										
Name of the Fund/Institution		DARUA HELP LINE SOCIETY										
Flat/ Door/ Block No.		0										
Name of Premises/Building/Village												
Road/ Street		DARUA										
Pincode		721401										
Post Office		Darua B.O										
Area/ Locality		Darua										
Town/City/District		EAST MIDNAPORE										
State		WEST BENGAL										
Country		INDIA										
Office Phone No. with STD Code												
Mobile No. 1		9830068658										
Fax No. with STD Code												
Mobile No. 2												
Email Address 1		incometax32017@rediffmail.com										
Email Address 2												
B. Legal Status												
Please specify whether the Fund/ Institution is -		Registered under the Societies Registration Act, 1860 (21 of 1860) or under any law corresponding to that Act in force in any part of India										
Please specify name of the law under which registered		WBSR ACT 1961										
C. Purpose												
Sl.No.	Purpose											
1	Relief of the poor											
2	Education											
3	Medical relief											
4	Preservation of environment (including watersheds, forests and wildlife)											
1a. In case of advancement of any other object of general public utility, please provide following:												
(i) Whether it involves the carrying on of any activity in the nature of trade, commerce or business, or any activity of rendering any service in relation to any trade, commerce or business, for a cess or fee or any other consideration?		-										
(ii) Whether the activity is undertaken in the course of actual carrying out of such advancement of any other object of general public utility; and		-										
(ii) Details of receipts from such activity:												
Sl.No.	Total Receipts (₹)	Aggregate Receipts from the Activity (₹)			Percentage to Total Receipts			Remarks, if any				
D In case of a Trust												
Details of Author (s)/ Founder (s)/ Settlor (s):												
S. No.	Name	PAN	Aadhaar No. (if allotted)	Address								
				Country	Flat/ Door/ Block No.	Road/ Street/ Block/ Sector	Pincode	Area/ Locality	Post Office	District City	State	
1	HUN ES F ATM A	AAWPF8 663N	63846695 8242	INDIA	67	DILKHU SA STRE ET	700017	Kolk ata	Circu s Ave nue S .O	KOL KAT A	WEST BEN GAL	
E In case of a Trust/ Society/Company/ Other Institutions												
Details of Trustee (s)/ Members of the Governing Council/ Director (s)/ Office Bearer (s):												
S. No.	Name	Designation	PAN	Aadhaar No. (if allotted)	Address							
					Country	Flat/ Door/ Block No.	Road/ Street/ Block/ Sector	Pincode	Area/ Locality	Post Office	District City	State



						Block No.	Block/ Sector					
1	HUNE S FATMA	SECRETARY	AAW PF86 63N	6384669582 42	INDIA	67	DILKHU SA STREET	7000 17	Kolkata	Circular Avenue S.O	KOLKATA	WEST BENGAL

**F Exemption/ Approval/ Registration Details**

S. No.	Please provide the relevant provision under which the income of the applicant would not be liable to inclusion in its total income	Status of approval or registration of the fund or institution:
1	11	Applied for registration under section 12A/ 12AA

2b			
S. No.	Section	Registration/ Application Number	Date of Registration/ Approval/ Application
1	12A/12AA	CIT (EXMPTION), KOLKATA/2019- 20/ 12AA/11230	26/10/2019

**G Details of Business**

1	Whether the applicant derives any income being profits and gains of business?	NO
1a	If yes, please provide the nature of business	
2	Whether the applicant maintains separate books of account in respect of such business?	-
3	Whether the donations received are used, directly or indirectly, for the purposes of such business?	-
4	Whether the instrument under which the institution or fund is constituted, or the rules governing the institution or fund, contains any provision for the transfer or application at any time of the whole or any part of the income or assets of the institution or fund for any purpose other than a charitable purpose?	NO
5	Whether institution or fund is expressed to be for the benefit of any particular religious community or caste?	NO
6	Whether the institution or fund maintains regular accounts of its receipts and expenditure?	YES

**H Details of Demand**

1	Whether any demand is outstanding for any assessment year (s)?			NO
1a	If yes, please provide the following details:			
S. No.	Assessment Year	Demand (₹)	Nature of Demand	Penalty imposed, if any (₹)

**I Details of Religious Expenses**

1	Whether the fund or the institution has incurred any expenditure of religious nature?	NO		
1a	If yes, please provide the following details:			
S. No.	Assessment Year	Total Income (₹)	Expenditure of Religious Nature (₹)	Percentage to Total Income

**J Miscellaneous**

1	Whether the trust deed contains clause that the trust is irrevocable?	YES
2	Details of, approval under sub-clause (iv), sub-clause (v), sub-clause (vi) or sub-clause (via) of clause (23C) of section 10, registration under section 12A or 12AA, rejection of application for approval/ cancellation of approval under section 80G:	

S. No.	Section/Clause/Subclause etc	Approval/Registration/ Rejection of application for approval/Cancellation of approval etc	Order No.	Order date	Authority issuing the order
1					

I HUNES FATMA , Daughter of IMAMUDDIN KHAN hereby declare that the details given in the application are true and correct to the best of my knowledge and belief. I undertake to communicate forthwith any alteration in the terms of the trust/ society/non-profit company, or in the rules governing the Institution, made at any time hereafter. I further declare that I am making this application in my capacity as SECRETARY (designation) and that I am competent to make this application and verify it.

10/07/2020

SECRETARY

Designation

Address	
Country	INDIA
Flat/ Door/ Block No.	67
Road/Street/Block/Sector	DILKHUSA STREET
Pincode/Zipcode	700017
Area/ Locality	Kolkata
Post Office	Circus Avenue S.O
District/ City	KOLKATA
State	WEST BENGAL

This form has been digitally signed by HUNES FATMA having PAN AAWPF8663N from IP Address 49.37.14.20 on 10/07/2020 .

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CENTER,ST=DELHI,2.5.4.17=#1306313130303932,OU=Certifying Authority,O=Capricorn Identity Services Pvt Ltd.,C=IN

