

**FORM NO. 50**  
**Application for a pre-filing consultation**

<b>Part A: Particulars of the Person</b>								
<b>1.</b>	Name:						<i>(refer Note 1)</i>	
<b>2.</b>	Address:						<i>(refer Note 2)</i>	
<b>3.</b>	Communication Address in India:						<i>(refer Note 3)</i>	
<b>4.</b>	Permanent account number:							
<b>5.</b>	Tax Identification Number (TIN), if available, in the country / region of residence:							
<b>6.</b>	E-mail ID:							
<b>7.</b>	Contact Number:						Country Code	Number
<b>8.</b>	Authorised Representative:						<i>(refer Note 4)</i>	
<b>Part B: Other Details</b>								
<b>9.</b>	Type of Advance Pricing Agreement (APA) <i>(Select one or more)</i> :						Unilateral/Bilateral/Multilateral	
<b>10.</b>	In case of Bilateral/Multilateral, whether the country/region where the Associated Enterprise (AE) is located has APA program?						Yes/No	
<b>11.</b>	Details of international transactions proposed to be covered:							
	Sl. No.	Type	Particulars of AE					
			Name	Location (Country/region)	AE's Taxpayer Identification Number (TIN) or its equivalent	Proposed Transfer pricing methodology (Select one)  <i>(refer Note 5)</i>	Estimated value for prior 3 tax years (If available)	
							FY	FY
	1.							
<b>12.</b>	Tax years for which APA is proposed including the rollback years:							
<b>13.</b>	Other details to be provided as separate enclosure:						<i>(attach as per Note 9)</i>	

<b>Verification</b>
<p>I _____, having PAN/TIN _____ issued by (Name of the country in case of TIN) _____ in the capacity of _____ declare that information / documents submitted in this form are true, comprehensive and accurate to the best of my knowledge and belief.</p>

Place:  
Date:

Signature:  
Name:

**Notes:**

1. The name shall include full name of the person.
2. The address shall include flat/door/building, road/street/block/sector, area/locality, post office, town/city/district, state, country/region and pin code/zip code.
3. The communication address in India shall include flat/door/building, road/street/block/sector, area/locality, post office, town/city/district, state and pin code.
4. The details of the Authorised Representatives shall include the full name, address, e-mail and contact number of the Authorised Representatives.
5. Transfer pricing methods shall be selected from the methods as specified in section 165.
6. If the space provided for answering any item in the application is found insufficient, separate enclosures may be used for the purpose. These enclosures should be signed by the person authorised to sign the application.
7. Where the region is a specified territory, the same is to be mentioned.
8. In case the pre-filing meeting is requested on an anonymous basis, no names of the applicant or associated enterprises are to be given. In such cases, details of the authorised representatives of the applicant namely: name, address and contact details (phone number and e-mail id) will be mandatory.
9. With respect to Part B (Sl. No. 13), following details shall be provided as annexures, namely: —

Annexure	Particulars				
A-1	The global structure of the applicant's group and the industry in which it operates.				
A-2	Business model and overview of the applicant's business operations in prior 3 tax years.				
A-3	Functional Profile of the applicant and associated enterprises.				
A-4	History of transfer pricing audits and present status of appeals.				
	Tax Year	Disputed International Transaction	Amount of Adjustment	Decision of each appellate authority	Current status
A-5	The details of all other international transaction not proposed to be covered in the APA.				

10. The amount mentioned in this form is to be filled in rupees unless stated otherwise.
11. Some of the information in the form would be pre-filled to the extent possible.