

UNION TERRITORY OF PONDICHERRY

Municipal  
Office Seal

..... MUNICIPALITY

Sl.No:

Date of Receipt:

**FORM FOR SELF-ASSESSMENT OF PROPERTY TAX**  
(See rule 8 of the Pondicherry Municipalities (Assessment of Annual Rental Value of Buildings / Houses) Rules, 2000.)

**PART—I**  
**Property Details**

*(To be filled in by the Assessee)*

1. Address of the Property :

(a) Door No./Flat No./Apartment No. :

(b) Name of the Street :

(c) Name of the Town/Colony/Nagar/  
Village :

(d) Pin code :

2. Area of the site & adjacent premises  
which are under occupation

(i) Area of the site :

(ii) Area of the adjacent premises :

3. Area of the land which are not under  
occupation :

4. Number of floors / storeys :

**PART—II**

**Details of Ownership and Occupants of the Property**

*[To be filled in by the Assessee(s)]*

- |  | LAND<br>OWNER | BUILDING<br>OWNER |
|--|---------------|-------------------|
| 1. Full name of the Owner(s)<br>(in CAPITAL LETTERS)           | :             | :                 |
| 2. Name of the Father/Husband                                  | :             | :                 |
| 3. Residential Address —                                       |               |                   |
| (a) Door No./Flat No./Apartment No.                            | :             | :                 |
| (b) Street Name  | :             | :                 |
| (c) Name of the Town/Colony/Nagar/<br>Village .                | :             | :                 |
| (d) Pin code   | :             | :                 |
| (e) Phone No. (if any)   | :             | :                 |
| 4. The building is under occupation of                         |               |                   |
| (i) Owner(s)   | : YES         | NO                |
| (ii) Tenant(s)   | : YES         | NO                |
| 5. Name and profession of the Tenant(s)<br>in case of Tenancy— |               |                   |
| (i) Name(s)  | :             | :                 |
| (ii) Profession  | :             | :                 |
| 6. Rent received per month in case of<br>tenancy               | :             | Rs.               |

**PART—III**

**Assessment of Property Tax**

**(A. Annual Rental Value of the Building / House)**

1. (To be filled in floor / storey wise since type of construction and mode of use may differ from one floor / storey to other)
2. Use additional streets in case of more than one floor/ storey.

Floor / Storey	Type of construction	Date of completion/ occupation	Nature of use	Occupant (Owner/ Tenant)	Plinth area (in sq.ft.)	Rate of annual rental value per sq. ft. as notified by the Municipi- pality	Annual rental value (Col. 6 × Col. 7)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
	Pucca building/ house with RCC/ Madras terraced roof		Residential	Owner			
				Tenant			
			Commercial/ Industrial	Owner			
				Tenant			
			Others	Owner			
				Tenant			
	Pucca building/ house with Asbes- tos or corrugated sheet/Mangalore tiles/country tiled roof		Residential	Owner			
				Tenant			
			Commercial/ Industrial	Owner			
				Tenant			
			Others	Owner			
				Tenant			

Floor / Storey	Type of construction	Date of completion/ occupation	Nature of use	Occupant (Owner/ Tenant)	Plinth area (in sq.ft.)	Rate of annual rental value per sq. ft. as notified by the Municipality	Annual rental value (Col. 6 × Col. 7)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
	Other building/ house which do not fall in the above mentioned two categories		Residential	Owner			
				Tenant			
			Commercial/ Industrial	Owner			
				Tenant			
			Others	Owner			
				Tenant			
<b>Total</b>					<b>Sq.ft.</b>	<b>Total</b>	<b>Rs.</b>

### (B. Half-Yearly Tax for the Building / House)

- (i) Annual Rental Value of the Building / House as per : Rs.  
Col No. 8 above.
- (ii) Rate of property tax as notified by the Municipality : (9% of the Annual Rental Value of the Building / House)
- (iii) Proposed Annual Property Tax – ( Annual Rental Value of the Building / House × 9/100) = : Rs.
- (iv) Proposed Half-Yearly Tax : Rs.

## UNDERTAKING

We / I ..... son / daughter / wife of  
Thiru ..... solemnly declare that the  
information given above is true to the best of my / our knowledge  
and belief.

*\* Signature(s)*  
*Name of the Owner(s)/*  
*Occupier(s)*

Place :

Date :

Address :

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*\* Self-assessment form to be filed*

- |  |     |  |
|--|-----|--|
| 1. In the case of a Company                              | ... | By the Secretary                         |
| 2. In the case of Partnership firm                       | ... | By the Partner                           |
| 3. In the case of Public Body,<br>Corporation or Society | ... | By the Secretary or<br>Principal Officer |
| 4. In any other cases                                    | ... | By the Owner or the<br>Occupier          |

**PART—IV**

(For Office Use)

1. Assessment number :  
(i) Existing :  
(ii) Proposed :
2. Existing Half-yearly Tax :
3. Municipal Ward Number and Name :
4. Classification of the road / street in which :  
the building / house is situated
5. Whether the particulars furnished by the :  
Assessee in Part-I and Part-II are correct  
or not.
6. If not, mention the variations in seriatim :
7. Whether the Half-yearly Tax as assessed  
by the Assessee in Part-III is correct or not:
8. If not, indicate the correct amount of :  
Half-yearly Tax.  
(A detailed worksheet should be attached)

*Signature* :

*Name* :

*Designation* :

**Revenue  
Inspector**

**Assistant  
Revenue  
Officer**

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**Revenue  
Officer**

**Commissioner**