

**MUNICIPAL CORPORATION OF HYDERABAD**  
**Self-Assessment of Property Tax Form/Return**  
**FORM A**

**(Fully Residential Property)**

(Information required to be filled by Owner/Occupiers(Owner/Tenant/Lessee)  
under section 213 of the HMC Act, 1955)

Property Tax Identification No (PTIN)  
(To be filled up by MCH Office)

**I Location Details**

Circle No.  Ward No  Block No.

Locality Name  Locality No.

Street Name  Street No.

House No.

Area Pin Code No

Name of the Building

**II Land Details**

Land Area in Square Yards

If Own land, state

(a) Name of Owner (s)

(b) Address

If land is taken on Lease state  
from whom lease taken

**III Building Details :**

Type of Building : Roof Code No

Flooring code No

(Code Numbers :

Roof: RCC	01
Tiled/Asbestos/Other	02
Thatched	03
Flooring : Partly of Fully Marble/Granite	01
Mosaic/Ceramic Tiles/Polished stone	02
Other	03

If Flat, Floor No. (Ground -G, First-01, Second-02, etc.)

If Individual House, No of Floors

Built- up (Plinth) Area of the Building /Flat in Square Feet

Year of Construction of Building /Flat

Use of the Building Code No. ( In case Non-residential)

**(Code No**

- Star Hotels 01
- Other Hotels/Lodging Houses/ Restaurants 02
- Commercial Complexes/ Markets/shops/office Complexes/Banks 03
- Cinema Theatres 04
- Kalyan Mandapam/Function Halls 05
- Hospitals/Nursing Homes/Clinics/Health/Care Establishments  
/Diagnostic Centres 06
- Educational Institutions 07
- Industries/Factories 08
- Religious & Charitable Institutions 09
- Other Uses 10

**IV Ownership Details :**

Name of the Owner,  
Address & Telephone No

Category of Ownership Code No.

(Code Numbers:

- Private: Individual 01
- Private: Corporate 02
- State Govt. 03
- Central Govt. 04
- State Govt. Undertaking 05
- Central Govt. Undertaking 06
- Other 07)

**V Occupancy Details :**

SL. No.	Name of Occupant (s)	Area Occupied Square Footage	If Rented, Monthly Rent Paid / Rate per Square Feet	If Self - occupied, Monthly Rent expected if let out / Rate per Square Feet prevailing for similar Property in the Vicinity (MRV)
1				
2				
3				
4				
5				

**VI. Existing Tax Details :**

Whether assessed to Tax or not: Yes or No

If yes, Property Tax Assessment/Bill No

Half-yearly Tax in Rupees

Half-year up to which Tax is paid

**VII Self -Assessment Tax  
(Proposed by Occupier (Owner/Tenant/Lessee):**

Total Plinth Area of Property (PA)

Monthly Rental Value (Prevailing Rent in Local Area  
per Month)- MRV

Annual Tax payable ( In Figures & Words)  
(For Guide line, See annexure)

Amount Already paid for 1999-2000  
(In Figures & Words)

Balance to be paid for 1999-2000  
(In Figures & Words)

Cheque/Demand Draft by which Tax paid  
Now (Name of Bank, Cheque/Draft No/Amount)

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**Acknowledgement**

Received Self-Assessment Form along with Cheque/Demand Draft No\_\_\_\_\_

Date \_\_\_\_\_ drawn on \_\_\_\_\_

(Name of Bank) from Shri\_\_\_\_\_

towards Self-Assessment Tax for the year \_\_\_\_\_ for property on Premises bearing

No \_\_\_\_\_ situated at \_\_\_\_\_.

**Date:**

**Receiver's Signature  
Name  
Designation  
Owner/Occupier**

**VIII. Address for correspondence:**


Telephone No.

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**DECLARATION**

I/We \_\_\_\_\_ Son/daughter/wife of  
Sri \_\_\_\_\_ solemnly declare that

I/We am/are fully aware of the legal provisions contain in section 213 and other sections of HMC act , 1955 and other relevant acts and the above information is correct to the best of my/our knowledge and belief.

**(SIGNATURE)**

**NAME OF THE OCCUPIER/OWNER :** \_\_\_\_\_

**DATE :**