

OFFICE OF THE  
INCOME-TAX OFFICER (TDS) 1(2)(1),  
Room No.811, Smt. K. G. Mittal Ayurvedic Hospital Building,  
Charni Road, Mumbai-400 002.

No. ITO(TDS)-1(2)(1)/NCLT/Deep Water/2018-19

Date:08/6/2018

To  
Mr. Mahesh Sureka,  
173, Udyog Bhavan, Sonawala Road,  
Goregaon(East), Mumbai-400063.

**Sub: Lodging of tax arrears in respect of corporate cases filed  
under Insolvency Bankruptcy before National Company  
Law Tribunal (NCLT)-reg.**

Sir,

Kindly refer to the above.

Please find enclosed herewith the application (in prescribed proforma Form 'G') for filing a claim before National Company Law Tribunal (NCLT) in the case of M/s Deep Water Services(India) Ltd. alongwith affidavit of documentary proof of demand outstanding as per TRACES.

Kindly condone the delay as the process of filing application has been completed after taking consultance from your office. Hence, in this case, the claim of this office may please be considered.

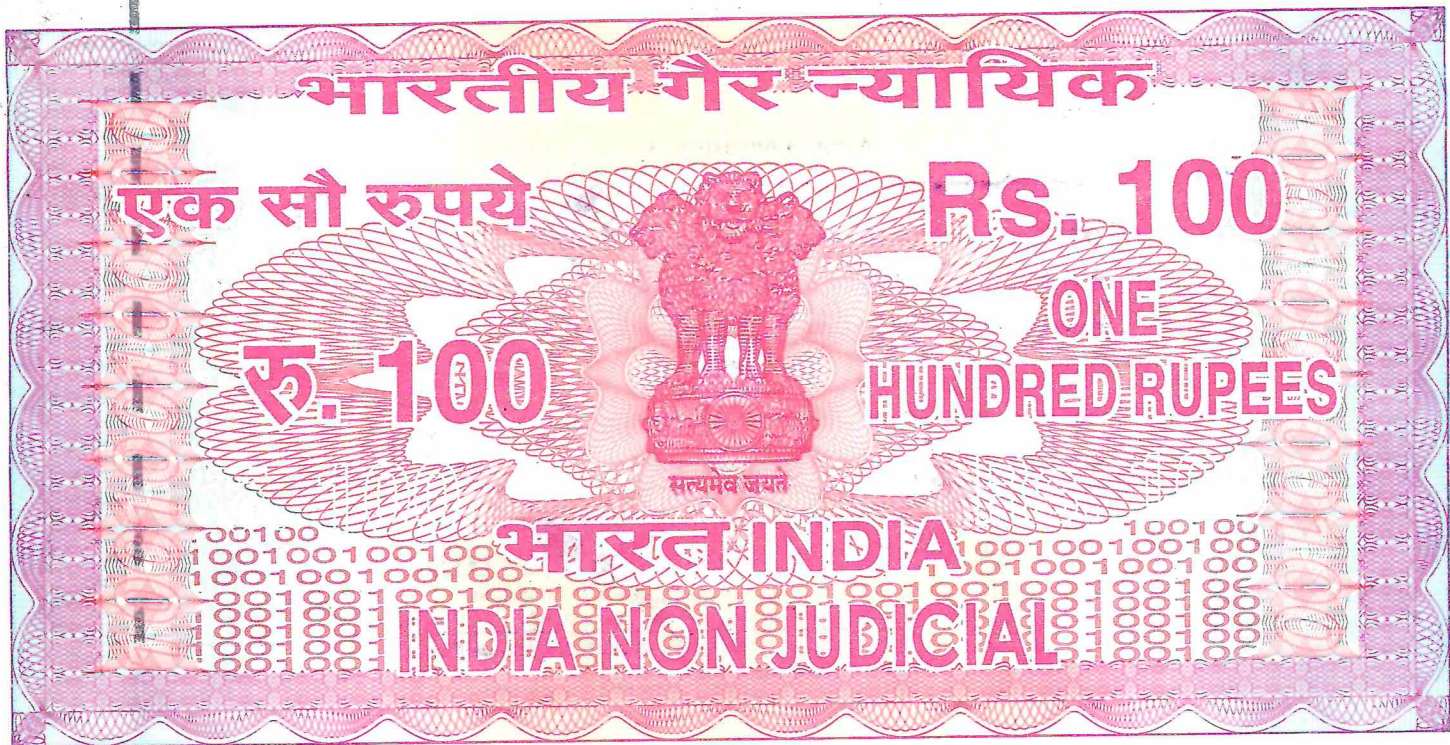
Submitted,

Yours faithfully,

Encl: As above.



*G. N. Rabhadia*  
(GIRDHAR N. RABHADIA ),  
I.T.O.(TDS)-1(2)(1), Mumbai  
राभाडिया गि. ना.  
G. N. RABHADIA  
आयकर अधिकारी (टी.डॉ.एस.) 1 (2) (1). मुंबई  
Income Tax Officer (TDS)-1 (2) (1), Mumbai



महाराष्ट्र MAHARASHTRA

2018

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प्रधान मुद्रांक कार्यालय, मुंबई  
पं.मू.वि.क्र. ८००००२०  
24 APR 2018  
सक्षम अधिकारी

श्रीमती. एस. वि. मसुरकर

AFFIDAVIT

I, G.N. RABHADIA, INCOME TAX OFFICER(TDS)1(2)(1), MUMBAI currently residing at INCOME TAX DEPARTMENT, O/o CIT(TDS)-1, SMT. K.G. MITTAL AYURVEDIC HOSPITAL BUILDING, 8th floor, Room No. 811, CHARNI ROAD (W), MUMBAI-400002, do solemnly affirm and state as follows:

1. The above named corporate debtor was, at the liquidation commencement date, that is, the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_ and still is, justly and truly indebted to me [or to me and [insert name of copartner], my co-partners in trade, or, as the case may be,] in the sum of Rs. 96,03,240/- .
2. In respect of my claim of the said sum or any part thereof, I have relied on the documents specified below: [Please list the documents relied on as evidence of proof.]
3. The said documents are true, valid and genuine to the best of my knowledge, information and belief.
4. In respect of the said sum or any part thereof, I have not, nor have my partners or any of them, nor has any person, by my/our order, to my/our knowledge or belief, for my/ our



use, had or received any manner of satisfaction or security whatsoever, save and except the following: [Please state details of any mutual credit, mutual debts, or other mutual dealings between the corporate debtor and the other stakeholder which may be set-off against the claim.]

Solemnly, affirmed at Mumbai on 11<sup>th</sup> day, the  
May 20 18

Before me,

Notary / Oath Commissioner.



*G. N. Rabhadia*  
Deponent's signature.

राभडिया गि. ना.  
**G. N. RABHADIA**

आयकर अधिकारी (टी.डी.एस.) 1 (2) (1), मुंबई  
Income Tax Officer (TDS)-1 (2) (1), Mumbai

VERIFICATION

I, the Deponent hereinabove, do hereby verify and affirm that the contents of para \_\_\_ to \_\_\_ of this affidavit are true and correct to my knowledge and belief. Nothing is false and nothing material has been concealed therefrom. Verified at Mumbai on this 11<sup>th</sup> day of May 2018



*G. N. Rabhadia*  
Deponent's signature.

राभडिया गि. ना.  
**G. N. RABHADIA**

आयकर अधिकारी (टी.डी.एस.) 1 (2) (1), मुंबई  
Income Tax Officer (TDS)-1 (2) (1), Mumbai



**BEFORE ME**

*P. S. Gujar*  
**P. S. GUJAR**  
ADVOCATE & NOTARY  
UNION OF INDIA  
GREATER MUMBAI  
REGD. NO. 9125

SR. No. 1923

Date: 11/5/2018



**Subject: Submission of proof of claim in respect of the liquidation of Deep Water Services (I) Ltd.**

**under the Insolvency and Bankruptcy Code, 2016.**

Madam/Sir,

Shri G. N. Rabhadia, The Income Tax Officer (TDS) 1(2)(1), Mumbai hereby submits this proof of claim in respect of the liquidation in the case of Deep Water Services (I) Ltd. The details for the same are set out below:

<p>1. NAME OF OTHER STAKEHOLDER  (IF AN INCORPORATED BODY PROVIDE IDENTIFICATION NUMBER AND PROOF OF INCORPORATION. IF A PARTNERSHIP OR INDIVIDUAL PROVIDE IDENTIFICATION RECORDS* OF ALL THE PARTNERS OR THE INDIVIDUAL)</p>	<p>The Income Tax Officer (TDS) 1(2)(1), Mumbai</p>
<p>2. ADDRESS AND EMAIL OF THE OTHER STAKEHOLDER FOR CORRESPONDENCE:</p>	<p>Room No. 811, 8<sup>th</sup> Floor, K.G. Mittal Ayurvedic Hospital Bldg. Charni Road (West), Mumbai-400 002.</p>
<p>3. TOTAL AMOUNT OF CLAIM, INCLUDING ANY INTEREST AS AT LIQUIDATION COMMENCEMENT AND DETAILS OF NATURE OF CLAIM</p>	<p>PRINCIPAL : Rs. 96,03,240/- CLAIM INTEREST :  TOTAL CLAIM : 96,03,240/- (AS per TRACES)</p>
<p>4. DETAILS OF DOCUMENTS BY REFERENCE TO WHICH THE CLAIM CAN BE SUBSTANTIATED</p>	<p>Affidavit of notice of outstanding demand of TRACES.</p>
<p>5. DETAILS OF HOW AND WHEN CLAIM AROSE</p>	<p>This demand is of TRACES of F.Y. 2010-11 to F.Y. 2015-16. Details of the demand is enclosed as per annexure.</p>
<p>6. DETAILS OF ANY MUTUAL CREDIT, MUTUAL DEBTS, OR OTHER MUTUAL DEALINGS BETWEEN THE CORPORATE DEBTOR AND THE OTHER STAKEHOLDER WHICH MAY BE SET-OFF AGAINST THE CLAIM</p>	<p>NA</p>
<p>7. DETAILS OF ANY RETENTION OF TITLE IN RESPECT OF GOODS OR PROPERTIES TO WHICH THE CLAIM REFERS</p>	<p>NA</p>
<p>8. DETAILS OF ANY ASSIGNMENT OR TRANSFER OF DEBT IN HIS FAVOUR</p>	<p>NA</p>
<p>9. DETAILS OF THE BANK ACCOUNT TO WHICH THE OTHER STAKEHOLDER'S SHARE OF THE PROCEEDS OF LIQUIDATION CAN BE TRANSFERRED</p>	<p>SBI Income Tax.</p>
<p>10. LIST OUT AND ATTACH THE DOCUMENTS RELIED ON IN SUPPORT OF THE CLAIM.</p>	<p>(i) Copy of demand notice of TRACES. (ii) (iii)</p>

Signature of other stakeholder or person authorised to act on his behalf

*G.N. Rabhadia*

(Please enclose the authority if this is being submitted on behalf of the other stakeholder)

Name in BLOCK LETTERS

G.N. RABHADIA

राधाधिया गि. ना.  
**G. N. RABHADIA**

आयकर अधिकारी (टी.डी.एस.) 1 (2) (1). मुंबई  
Income Tax Officer (TDS)-1 (2) (1), Mumbai

Position with or in relation to creditor

INCOME TAX OFFICER(TDS)1(2)(1), MUMBAI.

Address of person signing

Room No. 811, 8<sup>th</sup> Floor, K.G. Mittal Ayurvedic Hospital Bldg., Charni Road (West),  
Mumbai-400 002.

\*PAN, Passport, AADHAAR Card or the identity card issued by the Election Commission of India.

