Only 'Individuals' to affix recent photograph (3.5 cm x 2.5 cm)

Form No. 49A **Application for Allotment of Permanent Account Number** [In the case of Indian Citizens/Indian Companies/Entities incorporated in India/ Unincorporated entities formed in India]

Only 'Individuals'

	photograph (3.5 cm x		See Rule 114 To avoid mistake (s), please follow the accompanying instructions and examples before filling up the form															photograph (3.5 cm x												
2.5 cm) Assessing officer (AO code)																						2.5 cı	m)							
		A	rea code		AO type				Range code			Э	AO			ο.														
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	Ve hereby request that Ve give below necess	sary partio	culars:																						numb I					
1	Full Name (Full ex	panded r	name to b	e me	ntion	ed as	s ap	pea	ring	in p	oroo	f of	ider	ntity	/dat	e of	birt	th/a	ddre	SS (docu	ımeı	nts:	init	ials	are	not	per	mitted	
	Please select title,	✓ as ap	oplicable	L	Sh	ıri 📗			Smt.		L	Kuma		nari		M/s														
	Last Name / Surnar	me																						L		L				
	First Name																							L		L				
	Middle Name																													
2	Abbreviations of the above name, as you would like it, to be printed on the PAN card																													
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3	Have you ever bee	en known by any other name? Yes No												(please tick as applicable)																
	If yes, please give tha	t other nan	ne					_																						
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	Last Name / Surnar	ne																												
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	Middle Name																													
4	Gender (for Individ	vidual applicants only) Male Female													(please tick as applicable)															
5	Date of Birth/Inco	rporation	n/Agreem	ent/P	artne	rshi	p or	Tru	st D)eed	l/ Fo	rma	atior	ı of	Boo	ly of	inc	ivit	dual	s or	Ass	socia	atio	n of	f Per	sor	ıs			
	Day Month		Year																											
6	Details of Parents	(applica	ble only f	for in	divid	ual a	ppli	can	ts)																					
	Father's Name (Ma	andatory	. Even ma	arrie	d won	nen s	shou	ıld 1	fill iı	n fat	ther	's n	ame	onl	y)															
	Last Name / Surnar	ne																						Τ	T		T]	
	First Name			Ī																					T				1	

Details of Parer

Last Name / Surr First Name Middle Name Mother's Name (optional) Last Name / Surname First Name Middle Name Select the name of either father or mother which you may like to be printed on PAN card (Select one only) (In case no option is provided then PAN card will be issued with father's name)

Mother's name

Father's name

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7	Λ.	14	ress	

Residence Address Flat / Room / Door / Block No. Name of Premises / Building / Village Road / Street / Lane/Post Office Area / Locality / Taluka/ Sub- Division Town / City / District

State / Union Territory

Pincode / Zip code											Country Name													

(Please tick as applicable)

Pincode / Zip code

	Office Address				_											_		_				_	
	Name of office				+										_			+					
	Flat / Room / Door / Block No.				+	\vdash					_		_		_	_	_	+				_	
	Name of Premises / Building / Village	1													1								
	Road / Street / Lane/Post Office														_								
	Area / Locality / Taluka/ Sub- Division	_	Ш												4								
	Town / City / District																						
	State / Union Territory			Pin	code	/ Zip	code			Cou	untry	Naı	me								_		
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8	Address for Communication				Re	sider	ice				Of	ffice	•			(Ple	ase '	tick a	ıs ap	plic	able)	
9	Telephone Number & Email ID details																						
	Country code Area/STD Co	ode			Telep	ohone	/ Mc	bile n	umb	er						_							
	Email ID																						
10	Status of applicant																						
	Please select status, 🗸 as applicable																	Gov	ernm	nent			
	Individual Hindu undivide	ed famil	V	\Box c	ompa	any				Par	tners	ship	Firn	n			П	Ass	ociati	ion c	of Pe	rson	s
	Trusts Body of Individuals Local Authority Artificial Juridical Persons Limited Liability Partnershi																						
11																							
••	Trogistration Number (for company, in			J.,		1	Т	Т		T	T	T	Т		1	Т	Т	1					
40]					
12	In case of a citizen of India, then				-								_										
	Please mention your AADHAAR number	(if allott	ed)			Ш			Ш				\perp										
13	Source of Income															PI	ease	sele	ct,	/	as a	pplic	able
	Salary					_		_									C	apital	Gair	าร			
	Income from Business / Profession	Busine	ess/Pr	ofessi	on co	de		[For C	Code	: Re	fer i	nstrı	uctio	ons]		In	come	fron	n Oth	ner s	ourc	es
	Income from House property] N	o inco	me				
14	Representative Assessee (RA)																						
	Full name, address of the Representative been given in the column 1-13.	e Asses	see, v	who is	asse	ssible	und	er the	Inco	me '	Tax /	Act i	in re	spe	ct of	the p	erso	n, wl	nose	part	icula	ırs ha	ave
	Full Name (Full expanded name : initia	ıls are ı	not p	ermitt	ed)																		
	Please select title, 🗸 as applicable	SI	hri		Smt	t.		Kuma	ari		M/s	3											
	Last Name / Surname																						
	First Name																						
	Middle Name																						
	Address		,					,	•		,		·					,			•		
	Flat / Room / Door / Block No.	\Box			Т													Т					
	Name of Premises / Building / Village																						
	Road / Street / Lane/Post Office																						
	Area / Locality / Taluka/ Sub- Division																						
	Town / City / District																					=	
	State / Union Territory			Pin	code																		
15	Documents submitted as Proof of Ider	ntity (P	OI). P	roof c	f Add	dress	(PO	A) an	d Pro	oof o	of Da	ate c	of Bi	irth	(DOI	3)							
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	I/We have enclosed						as	proof	or da	ite o	DIL	n.											
	I/We have enclosed as proof of address and	final in [Dula	111 - 5)laa)\ f==		۔ ۔۔۔ ۔				e:			4- 4-	h	: مد جا			منا مسا	1 ما ما م
	as proof of address and [Please refer to the instructions (as speci	fied in I	Rule '	114 of			1962				- 1	ory	certi	fied	docu	men	ts to	be s	ubmi	itted	as a	pplic	able]
16	as proof of address and [Please refer to the instructions (as speci				, the	appli	1962 cant,	in the	е сар	acity	of		certi	fied	docu	men	ts to	be s	ubmi	tted	as a	pplic	able]
16	as proof of address and [Please refer to the instructions (as speci				, the	appli	1962 cant,	in the	е сар	acity	of		certi	fied	docu	men	ts to	be s	ubmi	itted	as a	pplic	able]
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16	as proof of address and [Please refer to the instructions (as specified) I/We do hereby declare that what is stated about	ove is tr			, the	appli	1962 cant,	in the	е сар	acity	of		certi	fied	docu	men	ts to	be s	ubmi	itted	as a	applic	able]
16	as proof of address and [Please refer to the instructions (as specified) I/We do hereby declare that what is stated about the place:	ove is tr			, the	appli	1962 cant,	in the	е сар	acity	of		certi	fied				be s					able]