

Only 'Individuals' to affix recent photograph (3.5 cm X 2.5 cm) Signature/Left Thumb Impression across this photo	Request for New PAN Card or / And Changes or Correction in PAN Data Permanent Account Number (PAN) <table border="1" style="margin: 0 auto; width: 100px; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> Please read Instructions 'h' & 'i' for selection boxes on left margin of this form.											Only 'Individuals' to affix recent photograph (3.5 cm X 2.5 cm) Signature/Left Thumb Impression										
☐ 1. Full Name (Full expanded name to be mentioned as appearing in proof of identity/address documents: initials are not permitted)																						
Please Select Title ☒ as applicable Shri ☐ Smt. ☐ Kumari ☐ M/s ☐																						
Last Name / Surname <table border="1" style="width: 100%; height: 20px;"></table>																						
First Name <table border="1" style="width: 100%; height: 20px;"></table>																						
Middle Name <table border="1" style="width: 100%; height: 20px;"></table>																						
Name you would like it printed on the PAN card																						
<table border="1" style="width: 100%; height: 20px;"></table>																						
☐ 2. Father's Name (only 'Individual' applicants : Even married women should fill in father's name only)																						
Last Name / Surname <table border="1" style="width: 100%; height: 20px;"></table>																						
First Name <table border="1" style="width: 100%; height: 20px;"></table>																						
Middle Name <table border="1" style="width: 100%; height: 20px;"></table>																						
☐ 3. Date of Birth / Incorporation/Agreement/Partnership or Trust Deed / Formation of Body of individuals or Association of Persons																						
<table border="1" style="width: 100%; height: 20px;"></table> (DD / MM / YYYY)																						
☐ 4. Gender (for Individual applicants only) ☐ Male ☐ Female <i>(Please tick as applicable)</i>																						
☐ 5. Photo Mismatch ☐ 6. Signature Mismatch																						
☐ 7. Address for Communication ☐ Resident ☐ Office <i>(Please tick as applicable)</i>																						
Name of Office (to be filled only in case of office address) <table border="1" style="width: 100%; height: 20px;"></table>																						
Flat/Room/Door/Block No. <table border="1" style="width: 100%; height: 20px;"></table>																						
Name of Premises/Building/Village <table border="1" style="width: 100%; height: 20px;"></table>																						
Road/Street/Lane/Post Office <table border="1" style="width: 100%; height: 20px;"></table>																						
Area/Locality/Taluka/Sub-Division <table border="1" style="width: 100%; height: 20px;"></table>																						
Town/City/District <table border="1" style="width: 100%; height: 20px;"></table>																						
State/Union Territory <table border="1" style="width: 100%; height: 20px;"></table> PIN Code <table border="1" style="width: 100px; height: 20px;"></table> Country <table border="1" style="width: 100px; height: 20px; text-align: center;">I N D I A</table>																						
☐ 8. If you desire to update your other address also, give required details in additional sheet.																						
☐ 9. Telephone Number & Email ID details																						
Country Code Area/STD Code Telephone / Mobile Number Email ID																						
<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 10%;">+</td> <td style="width: 10%;">9</td> <td style="width: 10%;">1</td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> </tr> </table>			+	9	1																	
+	9	1																				
☐ 10. AADHAAR number (if allotted) <table border="1" style="width: 100%; height: 20px;"></table>																						
☐ 11. Mention other Permanent Account Numbers (PANs) inadvertently allotted to you																						
PAN 1 <table border="1" style="width: 100px; height: 20px;"></table> PAN 2 <table border="1" style="width: 100px; height: 20px;"></table>																						
12. Verification																						
I/We <table border="1" style="width: 100%; height: 20px;"></table> the applicant, in the capacity of <table border="1" style="width: 100%; height: 20px;"></table>																						
fo hereby declare that what is stated above is true to the best of my/our information and belief.																						
I/We have enclosed ☐ (number of documents) in support of proposed changes/corrections.																						
Place : <table border="1" style="width: 100%; height: 20px;"></table>																						
Date : <table border="1" style="width: 100%; height: 20px;"></table> <table border="1" style="width: 100px; height: 20px; text-align: center;">2 0 1</table>																						
Signature/Left Thumb Impression of Applicant (inside the box)																						