

Form No. 49A**Application for Allotment of Permanent Account Number**

(In case of Indian Citizens/Indian Companies/ Entities incorporated in India/Unincorporated entities formed in India)

Under section 139A of the Income Tax Act, 1961

To avoid mistake(s), please follow the accompanying instructions and examples before filling up the form.

Only 'Individuals'
to affix recent
photograph
(3.5 cm X 2.5 cm)Only 'Individuals'
to affix recent
photograph
(3.5 cm X 2.5 cm)**Assessing Officer (AO Code)**

Area Code	AO Type	Range Code	AO No.

Sir,

I/We hereby request that a permanent account number be allotted to me/us.

I/We give below necessary particulars.

Signature/Left Thumb Impression across this photo

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

First Name

Middle Name

2. Abbreviation of the above name, as you would like it, to be printed on the PAN card**3. Have you ever been known by any other name ?** ☐ Yes ☐ No *(Please tick as applicable)*Please select title ☒ as applicable Shri ☐ Smt. ☐ Kumari ☐ M/s ☐

Last Name / Surname

First Name

Middle Name

4. Gender (for Individual applicants only) ☐ Male ☐ Female *(Please tick as applicable)***5. Date of Birth / Incorporation/Agreement/Partnership or Trust Deed / Formation of Body of individuals or Association of Persons**
(DD / MM / YYYY)**6. Father's Name** (Only Individual applicants: Even married women should fill in father's name only)

Last Name / Surname

First Name

Middle Name

7. Address (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

(Office 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

P U N J A B

PIN Code

Country

I N D I A

P U N J A B

PIN Code

Country

I N D I A

8. Address for Communication		☐ Residence	☐ Office	(Please tick as applicable)
9. Telephone Number & email ID details				
Country Code	Area/STD Code	Telephone / Mobile Number		
+ 9 1				
e-mail id				
10. Status of applicant				
Please select status, ☒ as applicable				
☐ Individual	☐ Hindu undivided family	☐ Company	☐ Partnership Firm	☐ Government
☐ Trusts	☐ Body of Individuals	☐ Local Authority	☐ Artificial Judicial Persons	☐ Association of Persons
			☐ Limited Liability Partnership	
11. Registration Number (for company, firms, LLPs, etc.)				
12. In case of a citizen of India, then				
Please mention your AADHAAR number (if allotted)				
13. Source of Income				
Please select status; ☒ as applicable				
☐ Salary				☐ Capital Gains
☐ Income from Business/Profession	Business/Profession code		(For code : Refer Instruction)	☐ Income from other sources
☐ Income from House property				☐ No Income
14. Representative Assessee (RA)				
Full Name, address of the Representative Assessee, who is assessable under the Income Tax Act in respect of the person, whose particulars have been given in the column 1-13.				
Full Name (Full expanded name: initials are not permitted)				
Please select title ☒ as applicable				
Shri	☐	Smt.	☐	Kumari
M/s	☐			
Last Name / Surname				
First Name				
Middle Name				
Address (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	P U N J A B	PIN Code		Country
				I N D I A
15. Documents submitted as Proof of Identity (POI) and Proof of Address (POA)				
I/We have enclosed as proof of identity and				
as proof of address as proof of date of birth.				
[Please refer to the instructions (as specified in Rule 114 of I.T. Rules, 1962) for list of mandatory certified documents to be submitted as applicable.]				
16. I/We				
the applicant, in the capacity of				
to hereby declare that what is stated above is true to the best of my/our information and belief.				
Place :				
Date :				
2 0 1				
Apply for PAN, TAN, FILE e-TDS/ TCS/24 G Returns at TIN-FC : TIN FACILITATION CENTRE Moti Bhuru Bazar, (Main Bazar) Near Dhodha Chowk, Kotkapura. Ph. : 01635-220579, Mb. 946 304 0808, 981 510 1878 email : sahuajag@gmail.com Signature/Left Thumb Impression of Applicant (inside the box)				