

यहा पर कस्टमर के
दोनों फोटो लगाए

Application for Permanent Account Number (PAN) [In the case of Indian Citizens/Indian Companies/Entities incorporated in India/

यहा पर वो ao code भरे जो आप
अनलाइन फॉर्म मे भरते है

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)

To avoid Assessing officer (AO code)

Area code	AO type	Range code	AO No.

Sign / Left Thumb impression across this photo

कस्टमर के सिग्नचर बॉक्स के अंदर हि कराने है

Signature / Left Thumb Impression

Sir,
I/We hereby request that a permanent account number be allotted to me/us.
I/We give below necessary particulars:

1 Full Name (Full expanded name to be mentioned as appearing in proof of identity/date of b

यहा पर कस्टमर का नाम
फिल करना है ओर अगर
नाम सिंगल नेम का तो
वह last name वाले कॉलम
मे फिल होगा

Please select title, as applicable Shri Smt. Kumari M/s

Last Name / Surname

First Name

Middle Name

2 Abbreviations 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)

If yes, please give that other name

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 Transgender (please tick as applicable)

5 Date of Birth/Incorporation/Agreement/Partnership or Trust Deed/ Formation of Body of individuals or Association of Persons

Day Month Year

यहा पर कस्टमर की date of
birth फिल करे

6 Details of Parents (applicable only for individual applicants)

Whether mother is a single parent and you wish to apply for PAN by furnishing the name of your mother only?

Yes No (please tick as applicable)

If yes, please fill in mother's name in the appropriate space provide below.

Father's Name (Mandatory except where mother is a single parent and PAN is

यहा पर कस्टमर का फादर नाम
फिल करे

Last Name / Surname

First Name

Middle Name

Mother's Name (optional except where mother is a single parent and PAN is applied by furnishing the name of mother only)

Last Name / Surname

First Name

Middle Name

Select the name of either father or mother which you wish to furnish for PAN (if State parent and you wish to apply for PAN

Father's name Mother's name

(In case no option is provided then PAN card will be issued to State parent and you wish to apply for PAN by furnishing name of the mother only)'.
यहा पर वो adress फिल करना
है जो कस्टमर के आधार कार्ड
मे है

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

Pincode / Zip code

Country Name

यहा पर state ओर
pin code फिल करे

Office Address

Name of office

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

Office address केवल trust firm llp aop मे फिल करना होता है personal pan card मे ये address fill नहीं करना होता है

8 Address for Communication Residence Office

(Please tick as applicable)

9 Telephone Number & Email ID details

Country code

Area/STD Code

Telephone / Mobile number

Email ID

आप जिस category का पेन कार्ड बना रहे हो उस पर टिक करे

10 Status of applicantPlease select status, as applicable Individual Hindu undivided family Company Partnership Firm Government Association of Persons Trusts Body of Individuals Local Authority Artificial Juridical Persons Limited Liability Partnership**11 Registration Number (for company, firms, LLPs etc.)****12 In case of a person, who is required to quote Aadhaar number or the Enrolment ID of Aadhaar application form as per section 139 AA**

Please mention your AADHAAR number (if allotted)

If AADHAAR number is not allotted, please mention the enrolment ID of Aadhaar application form

Name as per AADHAAR letter or card or as per the Enrolment ID of Aadhaar application form

यहा पर कस्टमर का आधार नंबर फिल करे

13 Source of IncomePlease select, as applicable Salary Income from Business / Profession

Business/Profession code

[For Code: Refer instructions]

 Income from House property Capital Gains Income from Other sources 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

18 वर्ष से कम उम्र के पेन कार्ड मे यहा पर अभिभावक की डेटेल फिल करनी होती है

Address

Flat / Room / Door / Block No.

Name of Premises / Building / Village

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Area / Locality / Taluka/ Sub- Division

Town / City / District

State / Union Territory

Pincode

15 Documents submitted as Proof of Identity (POI), Proof of Address (POA) and Proof of Date of Birth (POB)I/We have enclosed as proof of identity,as proof of address and 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]

[Annexure A, Annexure B & Annexure C are to be used wherever applicable]

16 I/We , the applicant, in the capacity of do hereby declare that what is stated above is true to the best of my/our information and belief.

Place:

Date:

D D M M Y Y Y Y

Signature / Left Thumb Impression of Applicant (inside the box)