Form No. 49A

Only Individuals to affix recent photgraph

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 to affix recent photgraph

	(3.5 cm x 2.5 cm)	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														(3.5 cm x 2.5 cm)													
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2	Abbreviation of the above	nam	e, as y	ou wo	ould	like	it, to	be	printed	d on	the	PAN	card	ı															
3	Have you ever been known by any other name?												Yes				No				(Ple	ase	tick	as a	ilgga	cable	e)		
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9 Telephone Number & Email ID details														
Country code Area / STD Code Telephone / Mobile number														
Email Id														
10 Status of applicant														
Please select status as applicable Government														
Individual Hindu Undivided Family Company Partnership Firm Association of Persons														
	hin													
Trusts Body of Individuals Local Authority Artifical Judicial Person 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 applicab)													
Salary Capital Gain														
Income from Business/Professio Business Profession Code (For Code: Refer instructions) Income from Other sour	ces													
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: I nitials are not permitted)														
Please select title as applicable Shri Smt. Kumari M/s														
riease select title as applicable Silli Silli. Ruman														
Last Name / Surname														
First Name														
Middle Name														
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 / UnionTerritory Pin code / Zip code														
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.														
[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														
do hereby declare that what is stated above is true to the best of my /our information and belief.														
·	$\overline{}$													
Place														
DD MM YYYY Signature / Left Thumb Impression of														
Date Applicant (inside the box)														