

# 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]

See Rule 114

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

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

### Assessing officer (AO code)

Area code	AO type	Range code	AO No.
P	T	N	W 3 0 9 4

Sign / Left Thumb impression  
across this photo

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

#### 1 Full Name (Full expanded name to be mentioned as appearing in proof of identity/date of birth/address documents: initials are not permitted)

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

Last Name / Surname

Q E S H A M A

First Name

Middle Name

#### 2 Abbreviations of the above name, as you would like it, to be printed on the PAN card

Q E S H A M A

#### 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

01      01      2005

#### 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 applied by furnishing the name of mother only)**

Last Name / Surname

A L A M

First Name

S A D Q E

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 may like to be printed on PAN card (Select one only)

Father's name  Mother's name (Please tick as applicable)

(In case no option is provided then PAN card will be issued with father's name except where mother is a single parent and you wish to apply for PAN by furnishing name of the mother only).

#### 7 Address

##### Residence Address

Flat / Room / Door / Block No.

D / 0

Name of Premises / Building / Village

D A R Q B H A N G I Y A T O L A W A R Q D - 1 3

Road / Street / Lane/Post Office

F O R Q B E S G A N J

Area / Locality / Taluka/ Sub- Division

F O R Q B E S G A N J

Town / City / District

A R Q A R Q I A

State / Union Territory

B I H A R

Pincode / Zip code

Country Name

8 5 4 3 1 8

I N D I A

**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

Pincode / Zip code

Country Name

**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

8 2 0 7 4 3 S 1 9 1

Email ID

ABDULSADIK908@GMAIL.COM

**10 Status of applicant**Please select status,  as applicable Government Individual Hindu undivided family Company Partnership Firm 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) 3 9 2 3 1 8 4 5 5 6 4 0

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

Q E S H A M A

**13 Source of Income**Please select,  as applicable Salary Capital Gains

Income from Business / Profession

Business/Profession code

[For Code: Refer instructions]

 Income from Other sources

Income from House property

 No income**14 Representative Assessee (RA)**

Full name, address of the Representative Assessee, who is assessible 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**

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

**15 Documents submitted as Proof of Identity (POI), Proof of Address (POA) and Proof of Date of Birth (POB)**I/We have enclosed  AADHAR CARD as proof of identity,  AADHAR CARDas proof of address and  AADHAR CARD 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 &amp; Annexure C are to be used wherever applicable]

**16 I/We** Q E S H A M A H E R S E L F, the applicant, in the capacity of  H E R S E L F

do hereby declare that what is stated above is true to the best of my/our information and belief.

Place :  M E E R U T

D D M M Y Y Y Y

Date :  1 4 1 0 2 0 2 5Signature / Left Thumb Impression of  
Applicant (inside the box)