Tax Invoice cum Acknowledgement receipt of PAN Application (Change Request)

Tax Invoice cum Acknowledgement Number	P - 700199700253745				Date- 24 Feb 2023
Category	INDIVIDUAL		GSTIN of Applicant		
Applicant's Name	BHARVAD SANJAYBHAI SHANTIBHAI			Existing PAN	BBMPH1218R
Name on Card	BHARVAD SANJAYBHAI SHANTIBHAI				
Father's Name	SHANTIBHAI HADGADA				
Mother's Name	Not mentioned				
Date of Birth/ Incorporation	01 Jun 1994	Communication Address State		GUJARAT (24)	
Telephone/ Mobile Number	91-9714519233	E-mail ID	PRAJAPATISHANKAR9999@GMAIL.COM		
Proof of Identity	AADHAAR Card issued by the Unique Identification Authority of India				
Proof of Address	AADHAAR Card issued by the Unique Identification Authority of India				
Proof of DOB	AADHAAR Card issued by the Unique Identification Authority of India				
PANs Surrendered	-	-	-	-	

On behalf of Protean eGov Technologies Limited (formerly NSDL e-Governance Infrastructure Limited) PAN Centre Managed by Protean.

Branch ID: 70019
Altruist Technologies Private Limited
PK EMITRA AND IT SOLUTION VP KANAKA KI DHANI NAWALRI ROAD VILL NAWALRI JHUNJHUNU RAJASTHAN 333042

PAN application fee	₹91.00
CGST 9%	₹0.00
SGST 9%	₹0.00
IGST 18%	₹16.38
Total(Rounded Off)	₹107.00

GSTIN:27AAACN2082N1Z8   CIN: U72900MH1995PLC095642   SAC : 998319

This is a computer generated receipt and does not require signature.   Online PAAM 1.2

For queries and information please contact: PAN/TDS Call Centers
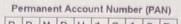020 - 27218080   020 - 27218081   tininfo@proteantech.in   @Protean_Tech

Income Tax PAN Services Unit (Managed by Protean)
Protean eGov Technologies Limited 4th floor, Sapphire Chambers, Baner Road, Baner, Pune 411045

If mobile no. is mentioned then you will receive SMS on status of your application.
You may track the status of your application using SMS facility – Type PTNPAN<space>15 digit acknowledgement no. and send it to 57575 or by visiting our website

This is a computer generated receipt and does not require signature.   Online PAAM 1.2

Request For New PAN Card Or/ And Changes Or Correction in PAN Da[ta]

Permanent Account Number (PAN)

| B | B | M | P | H | 1 | 2 | 1 | 8 | R |

Please read Instructions 'h' & 'i' for selecting boxes on left margin of this form.

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	S	H	A	N	T	I	B	H	A	I										
First Name	B	H	A	R	V	A	D													
Middle Name	S	A	N	J	A	Y	B	H	A	I										

Name you would like it printed on the PAN card

| B | H | A | R | V | A | D | | S | A | N | J | A | Y | B | H | A | I | | S | H | A | N | T | I | B | H | A | I |

2 Details of Parents (applicable only for Individual applicants)

Father's Name (Mandatory. Even married women should fill in father's name only)

Last Name / Surname	H	A	D	G	A	D	A													
First Name	S	H	A	N	T	I	B	H	A	I										
Middle Name																				

Mother's Name (optional)

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)

(In case no option is provided then PAN card will be issued with father's name) ✓ Father's Name ☐ Mother's Name (Please tick as applicable)

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

Day Month Year
| 0 | 1 | / | 0 | 6 | / | 1 | 9 | 9 | 4 |

4 Gender (for 'Individual' applicant only) ✓ Male ☐ Female ☐ Transgender *(Please tick as applicable)*

5 Photo Mismatch

6 Signature Mismatch

7 Address for Communication ✓ Residence ☐ Office *(Please tick as applicable)*

Name of Office (to be filled only in case of office address)																							
Flat/Room/ Door / Block No.	P	A	T	E	L	V	A	S															
Name of Premises/ Building/Village	V	I	S	A	T	P	U	R	A														
Road/Street/ Lane/Post Office	K	A	D	I																			
Area / Locality / Taluka / Sub- Division	K	A	D	I																			
Town / City / District	M	E	H	S	A	N	A																

| State / Union Territory | Pincode / Zip code | Country Name |
| 11 | 3 8 2 7 1 5 | INDIA |

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
| | | | | | | | 9 | 7 | 1 | 4 | 5 | 1 | 9 | 2 | 3 | 3 | |

Email ID | prajapatishankar9999@gmail.com

10 AADHAAR number (if allotted) | 6 | 5 | 9 | 0 | 9 | 9 | 1 | 3 | 4 | 9 | 1 | 4 |

Name as per AADHAAR letter/card

| B | H | A | R | V | A | D | | S | A | N | J | A | Y | B | H | A | I | | S | H | A | N | T | I | B | H | A | I |

11 Mention other Permanent Account Numbers (PANs) inadvertently allotted to you

PAN 1 | | | | | | | | | | PAN 2 | | | | | | | | | | PAN 3 | | | | | | | | | | PAN 4 | | | | | | | | | |

12 Verification

I/We | BHARVAD SANJAYBHAI SHANTIBHAI the applicant, in the capacity of | Self | do 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 | MEHSANA

D D M M Y Y Y Y
Date | 2 | 4 | 0 | 2 | 2 | 0 | 2 | 3

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

Note: As per provisions of Section 272B of the Income Tax Act, 1961, a penalty of ₹ 10,000 can be levied on possession of more than one PAN.

ભરવાડ સંજયભાઈ શાંતિભાઈ

આધાર નક ગુજબ સુધારો

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