



Application Number: A050716602

Payment Reference: 2059192827005686 / PY0067218432

Payment Date: 28/02/2022 Rs.107.00/-

Application Source: EWALLET - A - CSC E GOVERNANCE SERVICES INDIA LIMITED

Application Date: 28/02/2022

User Id: 262335420013

User Name:

PAN CARD MODE : Both physical PAN and e-PAN Card

Application Mode : Physical Application

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

To avoid mistakes, please follow the accompanying instructions and examples before filling up the form

Assessing officer (AO code)

Area code			AO type		Range code			AO No.	
S	H	L	W		1			9	2

Signature/Left Thumb Impression
across this photo

Mahmuda Begum.

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/address documents: initials are not permitted)

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

Last Name / Surname

B E G U M

First Name

M A H M U D A

Middle Name

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

M A H M U D A B E G U M

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

0 2

Month

1 2

Year

2 0 1 1

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 provided below.

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

Last Name / Surname

R A H M A N

First Name

A N I S U R

Middle Name

Mothers'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)

(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)

☒ Father's name☐ Mother's Name (Please tick as applicable)

7 Address

Residence Address

Flat / Room / Door / Block No.

2 4 3

Name of Premises / Building / Village

L U K A M P U R

Road / Street / Lane/Post Office

5 2

Area / Locality / Taluka/ Sub- Division

Town / City / District

L A K H I M P U R

State / Union Territory

Pincode / Zip code

Country Name

A S S A M

7 8 7 0 2 3

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

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

9 1

8 0 1 1 9 3 7 6 9 2

Email ID

alirofkr@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/The Enrolment ID of Aadhaar application form as per section 139AA

Please mention your AADHAAR number (if allotted) 4 3 1 5 8 7 1 4 1 2 4 3

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

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

M A H M U D A B E G U M

13 Source of Income

☐ Salary☐ Income from House property☒ No incomePlease select, ☒ as applicable☐ Capital Gains☐ Income from Business / Profession

Business/Profession code

[For Code: Refer instructions]

☐ Income from Other sources

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

R A H M A N

First Name

A N I S U R

Middle Name

Address

Flat / Room / Door / Block No.

2 4 3

Name of Premises / Building / Village

L U K A M P U R

Road / Street / Lane/Post Office

5 2

Area / Locality / Taluka/ Sub- Division

L U K A M P U R

Town / City / District

L A K H I M P U R

State / Union Territory

A S S A M

7 8 7 0 2 3 Pincode

15 Documents submitted as Proof of Identity (POI), Proof of Address (POA) and Proof of Date of Birth (DOB)

I/We have enclosed AADHAAR Card issued by as proof of identity, AADHAAR Card issued by UIDAI

as proof of address and AADHAAR Card issued by UIDAI 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 ANISUR RAHMAN the applicant, in the capacity of REPRESENTATIVE ASSESSEE

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

Place : LUKAMPUR

Date : 2 8 0 2 2 0 2 2

Mahmuda Begum

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



भारत सरकार
Government of India



Mahmuda Begum
Date of Birth/DOB: 02/12/2011
Female/ FEMALE

Issue Date: 31/01/2021

4315 8714 1243

VID : 9143 0428 2293 9347

मेरा आधार, मेरी पहचान

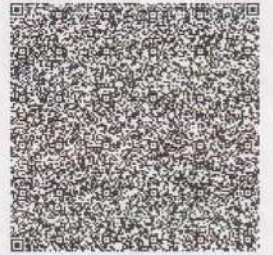
Download Date: 13/08/2021



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India



Address:
C/O: Anisur Rahman, Lokampur, Lakhimpur,
Assam - 787031



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VID : 9143 0428 2293 9347



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help@uidai.gov.in



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