



Acknowledgement Number : N- 881058252556775



## Request For New PAN Card Or/ And Changes Or Correction in

Permanent Account Number (PAN)

RCKPS7759R

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

Sign/ Left Thumb impression  
across this photo☐ 1.Full Name (Full expanded name to be mentioned as appearing in proof of identity/address

Please select title, as applicable



Shri



Smt



Kumari



M/S

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

Last Name/Surname

SINAN

First Name

MUHAMMED

Middle Name

Name you would like it printed on the PAN card

MUHAMMED SINAN

☐ 2 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 ☒

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

(please tick as applicable)

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

ASHRAF

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

RAZEENA

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



(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 mother only)

☒ 3. Date of Birth/Incorporation/Agreement/Partnership or Trust Deed/ Formation of Body of individuals or association of Persons

Day Month Year

10/05/2004

☒ 4. Gender (for individual applicants only)

Male



Female



Transgender

☒ 5. Photo Mismatch

6. Signature Mismatch

☒ 7. Address for Communication

Residence



Office

Name of office

Flat / Room / Door / Block No.

VENNUPOYIL MEETHAL P O

Name of Premises / Building / Village

PUTHUR Vadakara

Road / Street / Lane/Post Office

Area / Locality / Taluka/ Sub- Division

Town / City / District

Kozhikode

State / Union Territory

PIN Code

ZIP Code

Country Name

KERALA

673104

null

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

91

9037328137

Email ID

MUHAMMEDSINAN5034@GMAIL.COM

☒ 10. Please mention your AADHAAR number (if allotted)

XXXXXXXXX5814

Name as per AADHAAR letter/card

MUHAMMED SINAN

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

PAN

PAN

PAN

PAN

## 12. Verification

I/We **MUHAMMED SINAN** the applicant, in the capacity of

Himself/Herself

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

I/We have enclosed

changes/corrections. **1** (number of documents) in support of proposed

Place

VADAKARA

DD

MM

YYYY

Date

11/06/2023

Signature / Left Thumb Impression of

**13. Other 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

PIN Code

ZIP Code

Country Name

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