

Request for New Pan Card Or/And Changes Or Correction in PAN Data Field marked with * (asterisk) are mandatory. To Avoid Mistake(s), Please refer guidelines and instructions		
<input type="checkbox"/> * Whether citizen of India Yes <input type="radio"/> No <input type="radio"/>		
<input type="checkbox"/> *Permanent Account Number(PAN) <input type="text"/>		
<input type="checkbox"/> * 1. Name		
Title Shri/Mr <input type="radio"/> Smt./Mrs <input type="radio"/> Kumari/Ms <input type="radio"/>		
LastName <input type="text"/> FirstName <input type="text"/> MiddleName <input type="text"/>		
Name as you would like to printed on the Card (prefix like Shri, smt, kumari, late, Dr, CA, Ms, Mrs, Mr, M/s, Alias, etc are not allowed) <input type="text"/>		
Details of parents. (prefix like Shri, smt, kumari, late, Dr, CA, Ms, Mrs, Mr, M/s, Alias, etc are not allowed)		
Whether mother is single parent and you wish to apply for PAN by furnishing the name of your mother only Yes <input type="radio"/> No <input type="radio"/>		
<input type="checkbox"/> *Father's Name (Mandatory field. Even married women should give father's name only.)		
LastName <input type="text"/> FirstName <input type="text"/> MiddleName <input type="text"/>		
<input type="checkbox"/> Mother's Name (This field is optional.)		
LastName <input type="text"/> FirstName <input type="text"/> MiddleName <input type="text"/>		
<input type="checkbox"/> *4. Select parent name which is to be printed on the Card (In ase no option is provided then PAN card will be issued with father's name)		
Father Name <input type="radio"/> Mother Name <input type="radio"/>		
<input type="checkbox"/> *5. Date of Birth/Incorporation/Agreement/Partnership or Trust Deed/Formation of Body of Individuals/Association of Persons		
dd - mm - yyyy <input type="text"/>		
<input type="checkbox"/> *6. Gender		
Male <input type="radio"/> Female <input type="radio"/> TransGender <input type="radio"/>		
<input type="checkbox"/> 7. Photo Mismatch		
<input type="checkbox"/> 8. Signatur Mismatch		
<input type="checkbox"/> 9. Address for Communication		
Office Name (to be filled only in case of office address)		
Flat/Door/Block No.		
Name of premises/Building/Village		
Road/Street/Lane/PostOffice		
Area/Locality/Taluka/Sub-Division		
Town/City/District		
State/Union Territory		
PIN (Indicating PIN is mandatory)		
<input type="checkbox"/> 10. If you are desire to update your address, give required details & <u>Submit proof of other address also.</u>		
<input type="checkbox"/> *11. Telephone No. (Country code is compulsory)		
Country code(ISO code) <input type="text"/>		
<input type="radio"/> Mobile No. <input type="radio"/> Telephone No.		
Area/STD Code Telephone No./Mobile No.		
E-mail ID		
Incuse of a citizen of India, Then		
<input type="radio"/> AADHAAR <input type="radio"/> EID		
<input type="checkbox"/> *12. AADHAAR Number :		
Incuse AADHAAR number is provided. then proof of AADHAAR along with supporting documents is to be submitted to NDSL.		
<input type="checkbox"/> * Name as per AADHAAR letter or as per the enrollment ID of AADHAAR application form		
13. GSTIN		
<input type="checkbox"/> 14. Mention other Permanent Account Numbers (PANs) If any, Inadvertently allotted to you. <u>Submit proof of surrendered PAN(s) along with the application.</u>		
PAN1 <input type="text"/> PAN2 <input type="text"/>		
PAN3 <input type="text"/> PAN4 <input type="text"/>		
15. Verification		
15. Verification		
I/We <input type="text"/> , the applicant in the capacity of <input type="text"/> do hereby declare that what is stated above is true to the best of my information and belief.		
I have enclosed <input type="text"/> (number of documents) in support of proposed changes/corrections.		
Place <input type="text"/>		
Verification Done on, 30/6/2021		
I/We ahve enclosed <input type="text"/> --Please Select-- <input type="text"/> As proof of identity. <input type="text"/> --Please Select-- <input type="text"/> As proof of addresses <input type="text"/> --Please Select-- <input type="text"/> as proof of date of birth and <input type="text"/> --Please Select-- <input type="text"/> as proof of PAN allotted		
Whether you wish to have? <input type="radio"/> Physical PAN Card & e-PAN Card <input type="radio"/> Physical PAN Card & e-PAN Card <u>Fees Applicable</u>		
Other Details		
1. Depository Account Details		
DP ID: <input type="text"/> Client ID: <input type="text"/>		
2. Payment Details		
<input type="checkbox"/> Online Payment		
For Paperless PAN Application <input type="radio"/> Yes <input type="radio"/> No		
<input type="radio"/> DSC <input type="text"/> Guidelines for DSC user		
Upload Photo Upload Signature Upload Document		
<input type="text"/> Choose File No file chosen <input type="text"/> Choose File No file chosen <input type="text"/> Choose File No file chosen		
(OR)		
ALREADY UPLOADED PHOTO: UPLOADED SIGNATURE: ALREADY UPLOADED DOCUMENTS:		
<input type="text"/> <input type="text"/> <input type="text"/>		
SUBMIT		