



Acknowledgement Number: N- 881039142144873



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]**

Under section 139A of the Income Tax act, 1961

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

**Assessing officer (AO code)**

AREA CODE	AO TYPE	Range Code	AO NO
MUM	W	404	92

Signature / Left Thumb Impression of

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

KAMBLE

First Name

SAURAV

Middle Name

SOMNATH

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

SAURAV SOMNATH KAMBLE

3. Have you ever been known by other name?

If yes, please give that other name

☐ Yes ☒ No
☐ Shri ☐ Smt. ☐ Kumari ☐ M/S

Last Name/Surname

First Name

Middle Name

4. Gender(for individual applicants only)☒ Male ☐ Female ☐ Transgender**5. Date of Birth/Incorporation/Agreement/Partnership or Trust Deed/ Formation of Body of individuals or association of Persons**

Day Month Year

05/08/2005

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 provided 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

KAMBLE

First Name

SOMNATH

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)

(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)

(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)

7. Address**Residence Address**

Flat / Room / Door / Block No.

GAUTAM NAGAR, KIRTI NAGAR

Name of Premises / Building / Village

JAI SANTOSHI MATA SOCIETY

Road / Street / Lane/Post Office

NEAR MODERN BACKERY AAREY

Area / Locality / Taluka/ Sub-

COLONY GAOREGAON EAST

Town / City / District

MUMBAI

State / Union Territory

Pincode / Zip code

Country Name

MAHARASHTRA

400065

INDIA

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

8. Address for Communication



Residence



Office

Please tick as applicable

9. Telephone Number & Email ID details

Country code

Area/STD Code

Telephone / Mobile number

91

9004305799

Email ID

SAURAVKAMBLE052005@GMAIL.COM

10. Status of applicant

Please select status, as applicable



Individual



Hindu undivided family



Company



Partnership Firm



Government



Trusts



Body of Individuals



Local Authority



Artificial Juridical Persons



Association of 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)

XXXXXXXX9777

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

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

SAURAV SOMNATH KAMBLE

13. Source of Income



Salary

Business/Profession



Income from Business /



Income from House property

[For Code: Refer instructions]



Capital Gains



Income from Other sources



No income

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

First Name

Middle Name

Address

Flat / Room / Door / Block No.

Name of Premises / Building /

Road / Street / Lane/Post Office

Area / Locality / Taluka/ Sub- Division

Town / City / District

State / Union Territory

Pincode

Country Name

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 the Unique Identification Authority of India

as proof of identity

AADHAAR Card issued by the Unique Identification Authority of India

as proof of address and

AADHAAR Card issued by the Unique Identification Authority of India

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 SAURAV SOMNATH KAMBLE 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.

Place

MUMBAI

DD MM YYYY

Date

12/12/2023

Signature / Left Thumb Impression of

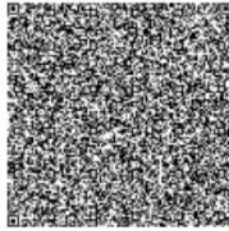


भारत सरकार
Government of India

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

नामांकन क्रम/ Enrolment No.: 2006/66186/02615

To
सावर सोमनाथ कांबळे
Saurav Somnath Kamble
S/O Somnath Kamble,
Near morden bekri,
gautam nagar jai santoshi mata welfare soc goregoan east,
VTC: Aarey Milk Colony,
District: Mumbai,
State: Maharashtra,
PIN Code: 400065,
Mobile: 9004305799



आपका आधार क्रमांक / Your Aadhaar No. :

2935 3839 9777

VID : 9176 6480 0309 9736

मेरा आधार, मेरी पहचान



भारत सरकार
Government of India



Aadhaar no. issued: 21/11/2011



सावर सोमनाथ कांबळे
Saurav Somnath Kamble
जन्म तिथि/DOB: 05/08/2005
पुरुष/ MALE

आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं।
इसका उपयोग सत्यापन (ऑनलाइन प्रमाणीकरण, या क्यूआर कोड/
ऑफलाइन एक्सप्रेसल की स्कैनिंग) के साथ किया जाना चाहिए।
Aadhaar is proof of identity, not of citizenship
or date of birth. It should be used with verification (online
authentication, or scanning of QR code / offline XML).

2935 3839 9777

मेरा आधार, मेरी पहचान



Government of India



सूचना / INFORMATION

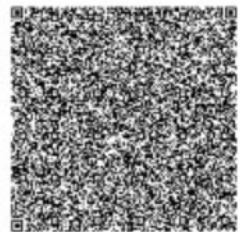
- आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं। जन्मतिथि आधार नंबर धारक द्वारा प्रस्तुत सूचना और विनियमों में विनिर्दिष्ट जन्मतिथि के प्रमाण के दस्तावेज पर आधारित है।
- इस आधार पत्र को यूआईडीएआई द्वारा नियुक्त प्रमाणीकरण एजेंसी के जरिए ऑनलाइन प्रमाणीकरण के द्वारा सत्यापित किया जाना चाहिए या ऐप स्टोर में उपलब्ध एमआधार या आधार क्यूआर कोड स्कैनर ऐप से क्यूआर कोड को स्कैन करके या www.uidai.gov.in पर उपलब्ध सुरक्षित क्यूआर कोड रीडर का उपयोग करके सत्यापित किया जाना चाहिए।
- आधार विशिष्ट और सुरक्षित है।
- पहचान और पते के समर्थन में दस्तावेजों को आधार के लिए नामांकन की तारीख से प्रत्येक 10 वर्ष में कम से कम एक बार आधार में अपडेट कराना चाहिए।
- आधार विभिन्न सरकारी और गैर-सरकारी फायदों/सेवाओं का लाभ लेने में सहायता करता है।
- आधार में अपना मोबाइल नंबर और ईमेल आईडी अपडेट रखें।
- आधार सेवाओं का लाभ लेने के लिए एमआधार ऐप डाउनलोड करें।
- आधार/बायोमेट्रिक्स का उपयोग न करने के समय सुरक्षा सुनिश्चित करने के लिए आधार/बायोमेट्रिक्स लॉक/अनलॉक सुविधा का उपयोग करें।
- आधार की मांग करने वाले सहमति लेने के लिए बाध्य हैं।
- Aadhaar is proof of identity, not of citizenship or date of birth (DOB). DOB is based on information supported by proof of DOB document specified in regulations, submitted by Aadhaar number holder.
- This Aadhaar letter should be verified through either online authentication by UIDAI-appointed authentication agency or QR code scanning using mAadhaar or Aadhaar QR Scanner app available in app stores or using secure QR code reader app available on www.uidai.gov.in.
- Aadhaar is unique and secure.
- Documents to support identity and address should be updated in Aadhaar after every 10 years from date of enrolment for Aadhaar.
- Aadhaar helps you avail of various Government and Non-Government benefits/services.
- Keep your mobile number and email id updated in Aadhaar.
- Download mAadhaar app to avail of Aadhaar services.
- Use the feature of Lock/Unlock Aadhaar/biometrics to ensure security when not using Aadhaar/biometrics.
- Entities seeking Aadhaar are obligated to seek consent.



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India



पता:
S/O सोमनाथ कांबळे, मोर्टेन बेकरी जवळ, गौतम नगर जय
संतोषी माता वेलफेअर सो गोरगाव ईस्ट, आरे मिल्क कॉलनी,
मुंबई.
महाराष्ट्र - 400065
Address:
S/O Somnath Kamble, Near morden bekri,
gautam nagar jai santoshi mata welfare soc
goregoan east, Aarey Milk Colony, DIST:
Mumbai,
Maharashtra - 400065



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