Step:1 Please stick (affix) (3.5cm x 2.5cm) SIZE PHOTO within the box

Step:2

Please sign across the photo with black ball point pen

2019021017691

Form No. 49A

Application for Allotment of Permanent Account Number [In the case of Indian Citizens/Indian Companies/Entitles incorporated in India/Unincorporated entitles 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 the form

Please stick (affix) (3.5cm x 2.5cm) SIZE PHOTO within the box

Please sign within the below box with black ball point pen

DO NOT SIGN ON THIS PHOTO

	Assessing officer (A				Sig	n with black b	all point pen	within the below	w box
	Area code	AO type	Range code	AO No.	↓				
0:- 14	Ma harabu rassurat that		an be allated to t		J				
	We hereby request that a po give below necessary partic		per de alloted to me/us.						
1 Full Name (Full expanded name to be mentioned as appearing in proof of identity/address documents: initials are not permitted)									
Please s	elect title,	☑ as applicabl	e 🛭 Shri	☐ Smt		Kumari	☐ M/s		
Last Nan	ne / Surname	RAJA							
First Name RUTHALA									
Middle N	lame								
2 Abbres	vistion of the shave name	as you would like it t	o he printed on the DAA	d card					
	2 Abbreviation of the above name, as you would like it, to be printed on the PAN card RUTHALA RAJA								
	ou ever been known by A	Any other name?	☐ Yes	☑ No		(Please tick as	s Applicable)		
		, cano. namo:	□ 162	A 140		(0000 tion de	ppcabio)		
	ease give that other name elect title,	☑ as applicabl	e ☑ Shri	□ Smt		Kumari	□ M	/s	
Last Nan	ne / Surname	_ == == ===============================						 	
First Nan	ne [
Middle N	lame								
4 Gende	ا r (for individual applicant	only)		□ Femal	۵			I	
	4 Gender (for individual applicant only) Male Female 5 Date of Birth/Incorporation/Agreement/Partnership/Trust Deed/ Formation of Body of individuals or Association of Persons								
5 Date of	Month Year	ement/Partnersnip/Tru	ist Deed/ Formation of E	souy of marviduals of i	ASSOCI	AUDII OI PERSONS			
06	09 1997								
6 Father's Name(Only 'Individual' applicants:Even married women should fill in father's name only)									
Last Nan	Last Name / Surname VENKATA RA								
First Nan	me	RUTHALA							
Middle N	lame								
7 Addres	ss .								
Residen	ce Address								
Flat / Roo	om / Door / Block No.		2-139						
Name of Premises / Building / Village		near trinity public schoo							
Road / Street / Lane / Post Office		indhira gandhi nagar							
Area / Lo	Area / Locality / Taluka / Sub- Division		old dairy form						
Town / City / District		VISAKHAPATNAM							
State / U	State / Union Territory		ANDHRA PRADESH						
Pincode / Zip code		530040							
Office Address Name of office									
	Name of office Flat / Room / Door / Block No.								
Name of Premises / Building / Village									
Road / Street / Lane / Post Office									
	ocality / Taluka / Sub- Divisi	on							
	City / District	-							
	nion Territory								
	/ Zip code								
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8 Address for Communication									
9 Telephone Number & Email ID details									
Country Code STD Code	Telephone Mobile Number 9491494315								
Email ID bhargav0343@gn	ail.com								
10 Status of Applicant									
Please select status,	☐ Government								
☑ Individual ☐ Hindu undivided	☐ Company ☐ Partnership Firm ☐ Association of Persons								
☐ Trusts family	☐ Local ☐ Artificial Juridical ☐ Limited Liability								
☐ Body of Individuals	Authority Persons Partnership								
11 Registration Number (for company, firms, LLPs, etc.)									
12 In case of a citizen of India, then									
Please mention your AADHAAR number	773384313195								
Name as per AADHAAR	RUTHALA RAJA								
13 Source of income									
Please select status, 🕡 as applicable									
☐ Salary	☐ Capital Gains								
☐ Income from Business /	0 [For Code: Refer instructions]								
Business / Profession of Profession	Other sources No income								
☐ Income from	E No meome								
House property									
14 Representative Assessee (RA)									
Full name, address of the Representative Assessable, who the column 1-13,	s assessable under the Income Tax Act in respect of the person, whose particulars have been given in								
Full Name (Full expanded name: initials are not permitted)									
Please select title, as applicab	e 🗌 Shri 🗎 Smt 🗎 Kumari 🗎 M/s								
Last Name / Surname	t Name / Surname								
First Name	Name								
Middle Name									
Address									
Residence Address									
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									
15 Documents submitted as Proof of Identity (POI) and	roof of Address (POA)								
I/We have enclosed AADHAAR CARD ISSUED BY UNIQUE IDENTIFICATION AUTHORITY OF INDIA as proof of identity and AADHAAR CARD ISSUED BY UNIQUE IDENTIFICATION AUTHORITY OF INDIA as proof of address. [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]									
16 I/We RUTHALA RAJA, the applicant, in the capacity of HIMSELF do hereby declare that what is stated above is true to the best of my/our information and belief.									
Place VISAKHAPATN Date 10-	Sign with black ball point pen within the below box								

Instructions for New PAN Application

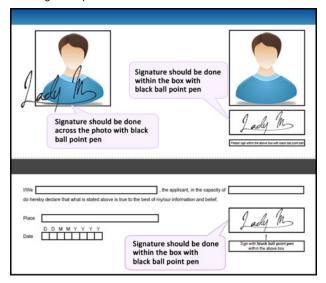
Reference No: 2019021017691

Instructions on photos and signing the form

Paste two stamp size photos in the space provided in the application form above

- a. Top Left Hand Side (Page1): Signature should be done across the photo and form
- b. Top Right Hand Side (Page1): Signature should be WITHIN the box under the photo
- c. Bottom Right Hand Side (Page 2): Signature should be WITHIN the box

Please note that forms not signed in prescribed method will be withheld.



Documents to be attached

Identity Proof	Full Name in the proof should match with application form
Residence Address Proof	Address in the proof should match with application form and it should be in applicant's name
Office Address Proof	Address in the proof should match with application form and it should be in applicant's name
Date of Birth Proof	Date of birth in proof should match with the application data

Dos & Don'ts

- 1. Do provide the POI, POA and DOB Proof which has the name exactly as mentioned in the application.
- 2. The Supporting Documents provided should be valid i.e. it should not be after the expiry date mentioned in the document.
- 3. DOB Proof should be provided as selected in the application form. Any other document would not be accepted. Notary Affidavit for Dob Proof will not be accepted.
- 4. Please sign only within the box provided in the application form.
- 5. Do NOT pin or staple the photograph.
- 6. Do paste a recent colour photograph (size 3.5 cm X 2.5 cm). The Passport photo in the application should be clear and distinct.
- 7. Do NOT mention Husband's name in the Father's Name column.
- 8. Do NOT use initials in first, middle and last name field.
- 9. Do write the complete postal address in the application with landmark.
- 10. Do mention correct pin code in the address field.

Send the application form and documents to below mentioned address:

PAN Services,

Applypanonline.com, 57/28, First Floor, IV Main Road, C.I.T. Nagar, Chennai – 600035.