


## Tax Invoice cum Acknowledgement receipt of PAN Application (Form 49A)


Tax Invoice cum Acknowledgement Number	P - 302789700031873				Date- 16 Feb 2024
Category	INDIVIDUAL	GSTIN of Applicant	NA		
Applicant's Name	VYANKATI RANGNATH THERDE				
Name on Card	VYANKATI RANGNATH THERDE				
Father's Name	RANGNATH LAXMAN THERDE				
Mother's Name	Not mentioned				
Date of Birth/ Incorporation	01 Jan 2011	Communication Address State	MAHARASHTRA (27)		
Telephone/ Mobile Number	91-9923710610	E-mail ID	SDINGOLE1991@GMAIL.COM		
Proof of Identity	AADHAAR Card issued by the Unique Identification Authority of India				
Proof of Address	AADHAAR Card issued by the Unique Identification Authority of India				
Proof of DOB	AADHAAR Card issued by the Unique Identification Authority of India				
On behalf of Protean eGov Technologies Limited (formerly NSDL e-Governance Infrastructure Limited) PAN Centre Managed by Protean.  Branch ID: 30278 Integrated Data Management Services Private Limited  C/O PATEL CHOICE CENTER WARD NO 20 FRONT OF TAHSIL OFFICE KHARSIA CHHATTISGARH 496661		PAN application fee		₹91.00	
		SGST 9%		₹8.19	
		CGST 9%		₹8.19	
		IGST 18%		₹0.00	
		Total(Rounded Off)		₹107.00	
GSTIN:27AAACN2082N1Z8		CIN: U72900MH1995PLC095642		SAC : 998319	





This is a computer generated receipt and does not require signature.


Online PAAM 1.2


Applicant's Copy

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		IGST 18%		₹0.00	
		Total(Rounded Off)		₹107.00	
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 020 - 27218080  020 - 27218081  tininfo@proteantech.in  @ProteanEgovTech

 Income Tax PAN Services Unit (Managed by Protean)  
Protean eGov Technologies Limited 4th floor, Sapphire Chambers, Baner Road, Baner, Pune 411045

 If mobile no. is mentioned then you will receive SMS on status of your application.  
You may track the status of your application using SMS facility – Type PTNPAN<space>15 digit acknowledgement no. and send it to 57575 or by visiting our website  
You are also requested to provide feedback on your experience of PAN service at [www.cleanmoney.gov.in](http://www.cleanmoney.gov.in)

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Online PAAM 1.2



Assessing officer (AO code)

Area code	AO type	Range code	AO No.
P N E	- W	- 2 7	9 3



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

T H E R D E

First Name

V Y A N K A T I

Middle Name

R A N G N A T H

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

V Y A N K A T I R A N G N A T H T H E R D E

## 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

Month

Year

0 1

0 1

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.

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

T H E R D E

First Name

R A N G N A T H

Middle Name

L A X M A N

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)

☒ 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 the mother only)

## 7 Address

Residence Address

Flat / Room / Door / Block No.

H O U S E - N o 3 2

Name of Premises / Building / Village

M A L E G A O N

Road / Street / Lane/Post Office

M A L E G A O N

Area / Locality / Taluka/ Sub- Division

A R D H A B A P U R

Town / City / District

N A N D E D

State / Union Territory

Pincode / Zip code

Country Name

MAHARASHTRA

4 3 1 7 5 0 -

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 ☒ Home ☐ Office (Please tick as applicable)

9 Telephone Number & Email ID details

Country code Area/STD Code Telephone / Mobile number  
+91 9923710610--

Email ID SD. INGOLE 1991@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) 5486 5856 9545

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

VYANKATI  
RANGNATH  
THERDE

13 Source of Income

☐ Salary ☐ Capital Gains  
☐ Income from Business / Profession Business/Profession code [For Code: Refer instructions] ☐ Income from Other sources  
☐ Income from House property ☐ 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

THERDE

First Name

RANGNATH

Middle Name

LAXMAN

Address

Flat / Room / Door / Block No.

HOUSE-NO 32

Name of Premises / Building / Village

MALEGAON

Road / Street / Lane/Post Office

MALEGAON

Area / Locality / Taluka/ Sub- Division

ARDHAPUR

Town / City / District

NANDED

State / Union Territory

Pincode

MAHARASHTRA

431750-

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 as proof of identity, AADHAAR CARD  
as proof of address and AADHAAR CARD 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 VYANKATI RANGNATH THERDE, 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 :

NANDED

Date :

D D M M Y Y Y Y

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



For PAN purpose only

भारत सरकार  
Government of India

व्यंकटी रंगनाथ थेरडे  
Vyankati Rangnath Therde  
वडील : रंगनाथ लक्ष्मण थेरडे  
Father : Rangnath Laxman Therde  
जन्म तारीख / DOB : 01/01/2011  
पुरुष / Male

5486 5856 9545

आधार - सामान्य माणसाचा अधिकार

आधार  
Unique Identification Authority of India

पत्ता  
वडिलाचे/आईचे नांव: रंगनाथ थेरडे, मु  
पोस्ट मालेगाव ता अर्धापुर, मालेगाव,  
नांदेड, मालेगाव, महाराष्ट्र, 431750

Address:  
S/O: Rangnath Therde, At/post  
malegaon tq Ardhapur, Malegaon,  
Nanded, Malegaon, Maharashtra,  
431750

5486 5856 9545

1947  
1800 300 1947

help@uidai.gov.in

www.uidai.gov.in

For PAN purpose only

भारत सरकार  
Government of India

रंगनाथ लक्ष्मण थेर्डे  
Rangnath Laxman Therde  
जन्म तारीख / DOB : 03/05/1983  
पुरुष / Male

6907 2753 3795

माझे आधार, माझी ओळख

भारत सरकार  
Government of India

रंगनाथ लक्ष्मण थेर्डे  
श्री पोस्ट मालेगाव तालुका, मालेगाव, मालेगाव  
सो. नांदेड महाराष्ट्र. 431750

Address: C/O Rangnath Laxman Therde,  
AT POST MALEGAON TO ARDHAPUR,  
Malegaon, Malegaon SO, Nanded,  
Maharashtra. 431750

6907 2753 3795

1067 help@citrusgate.com www.citrusgate.com

*(Signature)*