



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

Permanent Account Number (PAN)

BALPJ1626B

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

Sign/ Left Thumb impression
across this photoSignature / Left Thumb Impression of
Applicant (inside the box)☒ 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 ☐ Kumar ☐ M/S

Last Name/Surname

JAIN

First Name

SHUBHAM

Middle Name

Name you would like it printed on the PAN card

SHUBHAM JAIN

☒ 2 Details of Parents (Applicable only for Individual Applicants)

Father's Name (Mandatory , Even married women should fill this)

Last Name/Surname

JAIN

First Name

SURENDRA

Middle Name

Mother's Name (Optional)

Last Name/Surname

JAIN

First Name

PREETI

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

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

Day Month Year

20/10/1993

☒ 4. Gender(for individual applicants only)☒

Male

☐

Female

☒ 5. Photo Mismatch☒

6. Signature Mismatch

☒ 7. Address for Communication☒

Residence

☐

Office

Name of office

Flat / Room / Door / Block

Name of Premises / Building /

Road / Street / Lane/Post Office

Area / Locality / Taluka/ Sub-

Town / City / District

State / Union Territory

PIN Code

ZIP Code

Country

MADHYA PRADESH

470661

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

Area/STD Code

Telephone / Mobile

91

8962765332

Email ID

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

248627714826

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

PAN

PAN

PAN

PAN

12. Verification

I/We SHUBHAM JAIN

the applicant, in the capacity

Himself/Herself

do hereby declare that what is stated above is true to the best of my/our information
belief.I/We have enclosed 1 (number of documents) in support of proposed
changes/corrections.

Place

DHAMOH

DD

MM

YYYY

Date

23/12/2016

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

13. Other Address :

Name of office			
Flat / Room / Door / Block			
Name of Premises / Building /			
Road / Street / Lane/Post Office			
Area / Locality / Taluka/ Sub-			
Town / City / District			

State / Union Territory	PIN Code	ZIP Code	Country

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