


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

| | | | | |
|--|---|--|----------------------|-------------------|
| Tax Invoice cum Acknowledgement | N - 590689700009721 |  | | Date- 05 Oct 2019 |
| Category | INDIVIDUAL | GSTIN of Applicant | NA | |
| Applicant's Name | JITENDRA KUMAR BANGARWA | | | |
| Name on Card | JITENDRA KUMAR BANGARWA | | | |
| Father's Name | SOHAN LAL BANGARWA | | | |
| Mother's Name | Not mentioned | | | |
| Date of Birth/ | 02 Jan 2002 | Communication Address State | RAJASTHAN (8) | |
| Telephone/ Mobile | 91-9983605169 | E-mail ID | RBURDAK611@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 NSDL e-Governance Infrastructure Limited (PAN-Centre Managed by NSDL) | | PAN application fee | ₹91.00 | |
| Branch ID: 59068 Vertex Customer Solutions India Private Limited | | SGST 9% | ₹0.00 | |
| A TO Z COMPUTER EDUCATION NEAR GHANTAGHAR LAL KUA DURGA PUJA LAXMANGARH LACHHMANGARH RAJASTHAN 332311 | | CGST 9% | ₹0.00 | |
| | | IGST 18% | ₹16.38 | |
| | | 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

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

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Note:- "As per instruction from Income Tax Department, an authorized agencies' agent may visit you for your identity and address verification as per the documents submitted by you with the PAN application form. You are requested to ask authorization letter/ID card from the agent before verification. Your cooperation is solicited in this regard."

For queries and information please contact: PAN/TDS Call Centers
 020 - 27218080  020 - 27218081  tinfo@nsdl.co.in  @NSDL eGovernance
 Income Tax PAN Services Unit (Managed by NSDL)
 5th floor, Mantri Sterling, Plot No. 341, Survey No. 997/8, Model Colony, Near Deep Bungalow Chowk, Pune – 411 016
 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 NSDLPAN<space>15 digit acknowledgement no. and send it to 57575 or by visiting our website www.tin-nsdl.com.
 You are also requested to provide feedback on your experience of PAN service at www.cleanmoney.gov.in

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

Online PAAM 1.2

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]

See Rule 114

Assessing officer (AO code)

| Area code | AO type | Range code | AO No. |
|-----------|---------|------------|--------|
| A J N | - W | 1 0 8 0 1 | |

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

BANGARWA

First Name

JITENDRA

Middle Name

KUMAR

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

JITENDRA KUMAR BANGARWA

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
02 01 2002

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 BANGARWA

First Name

SOHAN

Middle Name

LAL

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.

SOHAN LAL BANGARWA

Name of Premises / Building / Village

KACHHWA

Road / Street / Lane/Post Office

KACHHWA

Area / Locality / Taluka/ Sub- Division

LAXMANGARH

Town / City / District

SZKAR

State / Union Territory

Pincode / Zip code

Country Name

RAJASTHAN

332026

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

9983605169

Email ID

SH2V7262SS@GMAIL.COM

10 Status of applicant

Please select status, ☒ as applicable☒ Individual☐ Hindu undivided family☐ Company☐ Partnership Firm☐ Government☐ Association of Persons☐ Trusts☐ Body of Individuals☐ Local Authority☐ Artificial Juridical 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) 8316 0868 0125

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

JITENDRA KUMAR BANGARWA

13 Source of Income

☐ Salary☐ Income from Business / Profession

Business/Profession code

[For Code: Refer instructions]

☐ Income from House propertyPlease select, ☒ as applicable☐ 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

BANGARWA

First Name

SOHAN

Middle Name

LAL

Address

Flat / Room / Door / Block No.

S/O HANAMANA RAM

Name of Premises / Building / Village

KACHHWA

Road / Street / Lane/Post Office

KACHHWA

Area / Locality / Taluka/ Sub- Division

LAXMANGARH

Town / City / District

SZIKAR

State / Union Territory

Pincode

RAJASTHAN

332026

15 Documents submitted as Proof of Identity (POI), Proof of Address (POA) and Proof of Date of Birth (DOB)

I/We have enclosed ADHAR CARD as proof of identity, ADHAR CARD

as proof of address and ADHAR 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 JITENDRA KUMAR BANGARWA are 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 :

SZIKAR

Date :

DDMMYY
24092019

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

Sohani



भारत सरकार
Government of India



जितेन्द्र कुमार बांगडवा
Jitendra Kumar Bangarwa
जन्म तिथि / DOB: 02/01/2002
पुरुष / Male



8316 0868 0125

मेरा आधार, मेरी पहचान

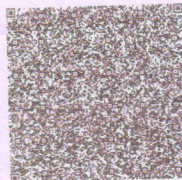


भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India

पता: C/O सोहन लाल बांगडवा, ग्राम- कछवा, तहसील- लक्ष्मणगढ़,
कछवा, कछवा, सीकर, राजस्थान, 332026

Address: C/O Sohan Lal Bangarwa, Gram-
Kachhwa, Tehsil- Laxmangarh, Kachhwa,
Kachhwa, Sikar, Rajasthan, 332026



8316 0868 0125



1947



help@uidai.gov.in

www

www.uidai.gov.in



भारत सरकार
Government of India



सोहन लाल
Sohan Lal

जन्म तिथि/DOB: 01/06/1976
पुरुष / Male



6047 9446 6861

आधार - आम आदमी का अधिकार



भारत सरकार
Unique Identification Authority of India

पता: S/O: हणमना राम, काछवा
नेछवा, सीकर, राजस्थान, 332026

Address: S/O: Hanamana
Ram, Kachhwa, Nechhwa,
Sikar, Rajasthan, 332026

6047 9446 6861

1947
1800 300 1947

help@uidai.gov.in

www
www.uidai.gov.in