

INSTRUCTION FOR FILLING FORM 49 A

090027173

- a) Use **BLACK INK** for filling the FORM and SIGNATURE. USE **BLCK** LETTERS ONLY.
 b) 'Individual' applicants should paste two recent, coloured photograph (stamp size : 3.5 cms x 2.5 cms) The Photograph should be not be stappled or clipped. The clarity of image on PAN card will depend on the quality and clarity of photograph pasted on the form.
 c) Thumb impression, if used, should be attested by a Magistrate or a Notary Public or a Gazetted Officer, under official seal and stamped.
 d) Each box, wherever provided, should contain only one character (a'phabets/number/punctuation sign.) leaving box blank after each word.
 e) Please sign / left thumb across photograph (Left hand side)



Application for PAN Card Processing Fee

Under Section 139A of the Income Tax Act, 1961
 To avoid mistake (s), please read the accompanying instructions and examples before filling up the form

559267332

Permanent Account Number



Assessing officer (AO code)

Area Code	AO type	Range code	AO No.
G U J	W	1 2 0	2

Mr. B. SABHAD

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 SABHAD

First Name GOPAL

Middle Name BHAGVANBHAI

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

SABHAD GOPAL BHAGVANBHAI

3. Have you ever been know 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 (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 07 07 1993 07-07-1993

6. Father's Name (Only 'Individual' applicants: Even married women should give father's name only)

Last Name / Surname SABHAD

First Name BHAGVANBHAI

Middle Name SAMATBHAI

7. 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

Pin code / Zip code

Country Name

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

Pin code / Zip code

Country Name

8. Address for Communication		<input checked="" type="checkbox"/> Residence	<input type="checkbox"/> Office	(Please tick as applicable)
9. Telephone Number & Email ID details				
Country Code	STD Code	Telephone Number / Mobile Number		
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E-mail ID		<div></div>		
10. Status of applicant				
Please select title, <input checked="" type="checkbox"/> as applicable				
<input checked="" type="checkbox"/> Individual	<input type="checkbox"/> Hindu undivided family	<input type="checkbox"/> Company	<input type="checkbox"/> Partnership Firm	<input type="checkbox"/> Government
<input type="checkbox"/> Trusts	<input type="checkbox"/> Body of Individuals	<input type="checkbox"/> Local Authority	<input type="checkbox"/> Artificial Juridical Persons	<input type="checkbox"/> Association of Persons
				<input type="checkbox"/> Limited Liability Partnership
11. Registration Number (for company, firms, etc.)				
<div></div>				
12. In case of a citizen of India, then <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Please mention your AADHAAR number (if allotted)		<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		
13. Source of Income Please select status, <input checked="" type="checkbox"/> as applicable				
<input checked="" type="checkbox"/> Salary	<input type="checkbox"/> Income from Business / Profession	<input type="checkbox"/> Income from: House property	Business/Profession code <div><div></div><div></div></div> Refer table at point no.12	<input type="checkbox"/> Capital Gains <input type="checkbox"/> Income from Other sources <input type="checkbox"/> 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, <input checked="" type="checkbox"/> as applicable <input type="checkbox"/> Shri <input type="checkbox"/> Smt. <input type="checkbox"/> Kumari <input type="checkbox"/> M/s				
Last Name / Surname		<div></div>		
First Name		<div></div>		
Middle Name		<div></div>		
RA's Address				
Flat/Room/Door/Block No.		<div></div>		
Name of Premises/Building/ Village		<div></div>		
Road/Street/Lane/Post Office		<div></div>		
Area/ Locality/ Taluka/ Sub-division		<div></div>		
Town/ City/ District		<div></div>		
State/ Union Territory		Pin code <div><div></div><div></div><div></div><div></div><div></div><div></div></div>		
15. Documents submitted as Proof of Identity (POI) and Proof of Address (POA)				
I/We have enclosed <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div> as proof of identity and <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div> as proof of address		and Aadhaar card as proof of Date of Birth		
16. I <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div> Sabhad Gopal Bhagvanthor		the applicant, do hereby declare that what is stated above is true to the best of my information and belief.		
Place BHAVNAGAR .				
Date <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div> 21052015				
		<div>RECEIVED 21 MAY 2015 UTILITY IT PAN SERVICE BHAVNAGAR.</div>		
		<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div> <div>X <div></div> B. SABHAD</div> <div>Signature / Left Thumb Impress of Applicant (inside the box)</div>		



ભારતીય વિશિષ્ટ ઓળખાણ પ્રાધિકરણ

ભારત સરકાર
Unique Identification Authority of India
Government of India

નોંધણીની ઓળખ / Enrollment No 1104/60162/10412

To,
સભાડ ગોપાલ ભગવાનભાઈ
Sabhad Gopal Bhagvanbhai
juni manekwadi
dhor na dabba pase
hanumanji na mandii ni bajuma
Bhavnagar
Bhavnagar Gariadhar Bhavnagar
Gujarat 364001
9974781010

Ref: 111 / 28K / 221212 / 221445 / P



SH588044515FT



તમારો આધાર નંબર / Your Aadhaar No. :

2762 0477 2666

આધાર - સામાન્ય માણસનો અધિકાર



ભારત સરકાર
Government of India



સભાડ ગોપાલ ભગવાનભાઈ
Sabhad Gopal Bhagvanbhai
જન્મ તારીખ / DOB : 07/07/1993
પુરુષ / Male



2762 0477 2666

આધાર - સામાન્ય માણસનો અધિકાર



Government of India



નિર્દેશ

- આધાર ઓળખાણનું પ્રમાણ છે, નાગરિકતાનું નહિ .
- ઓળખાણનું પ્રમાણ ઓનલાઇન ઓથેન્ટિકેશન દ્વારા પ્રાપ્ત કરો .

INFORMATION

- Aadhaar is proof of Identity, not of citizenship .
- To establish identity, authenticate online .

- આધાર દેશભરમાં માન્ય છે .
- આધાર ભવિષ્યમાં સરકારી અને બિન-સરકારી સેવાઓનો લાભ મેળવવામાં ઉપયોગી થશે .
- Aadhaar is valid throughout the country .
- Aadhaar will be helpful in availing Government and Non-Government services in future .

28K/2-212



ભારતીય વિશિષ્ટ ઓળખાણ પ્રાધિકરણ
Unique Identification Authority of India

સરનામું: જુની માણેકવાડી, ઢોર ના ડબ્બા પાસે, હનુમાનજી ના મંદિર ની બાજુમાં, ભાવનગર, ભાવનગર, ગુજરાત, 364001

Address: juni manekwadi, dhor na dabba pase, hanumanji na mandir ni bajuma, Bhavnagar, Bhavnagar, Gujarat, 364001

2762 0477 2666

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1800 300 1947

help @ uidai.gov.in

www.uidai.gov.in