

## Application for Allotment of Permanent Account Number

138355976

[In the case of Indian Citizen]

/Entities incorporated in India/  
ed in India]

Unincor

Under se

To avoid mistake(s), please follow th



Tax Act, 1961

and examples before filling up the form

Assessing officer (AO code)

Area code	AO type	Range code	AO No.
CUJ	-M	309	3

Sign/Left Thumb impression across  
this photo

Sir, I/We hereby request that a permanent account number be allotted to me/us.

I/We give below necessary particulars :

1351458433  
Appl. Verify

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

First Name

Middle Name

P	A	T	E	L															
R	I	N	K	U	B	E	N												
R	A	J	O	B	H	A	T												

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

P	A	T	E	L															
R	I	N	K	U	B	E	N												
R	A	J	O	B	H	A	T												

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

(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

03

10

1989

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

Last Name / Surname

First Name

Middle Name

M	I	S	T	R	Y														
R	O	J	O	B	H	A	T												
N	A	K	E	N	B	H	A	T											

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

Pincode / Zip code

Country Name

GUJARAT

393001

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 &amp; Email ID details

Country code

Area/STD Code

Telephone / Mobile number

Email ID

## 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 citizen of India, then

Please mention your AADHAAR number (if allotted)

## 13 Source of income

☐

Salary

☐

Income from Business / Profession

Business / Profession code

(For Code Refer instructions)

☐

Income from House property

Please select status, ☒ 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

First Name

Middle Name

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

## 15 Documents submitted as Proof of Identity (POI) and Proof of Address (POA)

I/We have enclosed

AADHAAR CARD

as proof of identity and

AADHAAR CARD

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

PATEL RINKUBEN RAJUBHAI

, the applicant, in the capacity of

INDIVIDUAL

do hereby declare that what is stated above is true to the best of my/our information and belief.

Place

Date

PSA CODE : 1GJ73756

રંગના સારા યેઠ

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



ભારત સરકાર

Government of India



પટેલ રિંકુબેન રાજુભાઈ

Patel Rinkuben Rajubhai

જન્મ તારીખ / DOB : 03/10/1989

સ્ત્રી / Female



6431 1782 8690

આધાર - સામાન્ય માણસનો અધિકાર



ભારતીય વિશિષ્ટ ઓળખાણ-પ્રાધિકરણ

Unique Identification Authority of India

સરનામું:

નવી નગરી, પોસ્ટ કોસ્મડી, બાકરોલ,  
અંકલેશ્વર, ભરુચ, અંકલેશ્વર, ગુજરાત,  
393001

Address:

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Ankleshwar, Bharuch, Anklesvar,  
Gujarat, 393001

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