



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

Permanent Account Number (PAN)

NDNPS1377B

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

Only 'Individuals' to affix recent photograph (3.5 cm x 2.5 cm)

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Sign/ Left Thumb impression across this photo

☐ 1.Full Name (Full expanded name to be mentioned as appearing in proof of identity/address

Please select title, as applicable



Shri



Smt



Kumari



M/S

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

Last Name/Surname

SAHANI

First Name

SUSHILKUMAR

Middle Name

SITARAM

Name you would like it printed on the PAN card

SUSHILKUMAR SITARAM SAHANI

☒ 2 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 ☒

If yes, please fill in mother's name in the appropriate space provided below.

(please tick as applicable)

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

SAHANI

First Name

SITARAM

Middle Name

BABULAL

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)

In case no option is provided, then PAN Card will be issued with Father's Name.

Father's Name



Mother's Name



(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 mother only)

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

Day Month Year

23/07/2002

4. Gender (for individual applicants only)



Male



Female



Transgender

☒ 5. Photo Mismatch

6. Signature Mismatch

☒ 7. Address for Communication

Residence



Office

Name of office

Flat / Room / Door / Block No.

FLAT NO 207 BUILDING C-2

Name of Premises / Building / Village

SNEHA VIHAR

Road / Street / Lane/Post Office

DANGAT PATIL NAGAR

Area / Locality / Taluka/ Sub- Division

SHIVANE

Town / City / District

PUNE

State / Union Territory

PIN Code

ZIP Code

Country Name

MAHARASHTRA

411023

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 code

91

Area/STD Code

020

Telephone / Mobile number

9307918749

Email ID

SUSHILKUMARSAHANI41@GMAIL.COM

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

XXXXXXXXX2955

Name as per AADHAAR letter/card

SUSHILKUMAR SITARAM SAHANI

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

PAN

PAN

PAN

PAN

12. Verification

I/We SUSHILKUMAR SITARAM SAHANI

the applicant, in the capacity of

Himself/Herself

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

I/We have enclosed

changes/corrections.

2

(number of documents) in support of proposed

Place

PUNE

Date

DD MM YYYY
24/07/2024

Signature / Left Thumb Impression of

13. Other 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

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