Copy to be kept with application

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

Tax Invoice cum Acknowledgement Number	P - 587809700035633		Date- 04 Jul 2025
Category	INDIVIDUAL	**GSTIN of Applicant**	NA
Applicant's Name	SUSHIL KUMAR		
Name on Card	SUSHIL KUMAR		
Father's Name	CHAND MAHTO		
Mother's Name	Not mentioned		
Date of Birth/ Incorporation	20 Aug 1994	**Communication Address State**	JHARKHAND (20)
Telephone/ Mobile Number	91-9153561247	**E-mail ID**	RATHO1993@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 Protean eGov Technologies Limited PAN Centre Managed by Protean.

Branch ID: 58780
Integrated Data Management Services Private Limited
Csc Centre Nr Mishrian Morha P O Religarha, P S Giddi Hazaribagh JHARKHAND 829129

PAN application fee	₹91.00
SGST 9%	₹0.00
CGST 9%	₹0.00
IGST 18%	₹16.38
Total(Rounded Off)	**₹107.00**

GSTIN:27AAACN2082N1Z8	**CIN: L72900MH1995PLC095642**	**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)

Tax Invoice cum	P - 587809700035633		Date- 04 Jul 2025
Category	INDIVIDUAL	**GSTIN of Applicant**	NA
Applicant's Name	SUSHIL KUMAR		
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Branch ID: 58780 Integrated Data Management Services Private Limited
Csc Centre Nr Mishrian Morha P O Religarha, P S Giddi Hazaribagh JHARKHAND 829129

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

PAN application fee	₹91.00
CGST 9%	₹0.00
SGST 9%	₹0.00
IGST 18%	₹16.38
Total(Rounded Off)	**₹107.00**

GSTIN:27AAACN2082N1Z8	**CIN: L72900MH1995PLC095642**	**SAC : 998319**

For queries and information please contact: PAN/TDS Call Centers

Automated IVR - 08069708080 **Whatsapp Support - 8096078080** **tininfo@proteantech.** **@ProteanEgovTech**

Income Tax PAN Services Unit (Managed by Protean)
Protean eGov Technologies Limited 4th floor, Sapphire Chambers, Baner Road, Baner, Pune 411045 020 - 27218080 (From 7:00AM to 11:00PM, Monday to Sunday)

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 PTNPAN<space>15 digit acknowledgement no. and send it to 57575 or by visiting our website

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



Sign / Left Thumb impression across this photo

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

To avoid mistake (s), please follow the accompanying instructions and examples before filling up the form



Assessing officer (AO code)

Area code			AO type		Range code			AO No.	
P	T	N	W		S	7		1	

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/date of birth/address documents: initials are not permitted)

Please select title, ✓ as applicable ☑ Shri ☐ Smt. ☐ Kumari ☐ M/s

Last Name / Surname: KUMAR

First Name: SUSHIL

Middle Name:

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

SUSHIL KUMAR

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
21	08	1994

6 Details of Parents (applicable only for individual applicants)

Father's Name (Mandatory. Even married women should fill in father's name only)

Last Name / Surname: MAHTO

First Name: GYSN

Middle Name: CHAND

Mother's Name (optional)

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 *(Please tick as applicable)*

7 Address

Residence Address

Flat / Room / Door / Block No.: WARD 10

Name of Premises / Building / Village: JAMNIDIH SIKRI

Road / Street / Lane/Post Office: BARKAGAON

Area / Locality / Taluka/ Sub- Division: BARKAGAON

Town / City / District: HAZARIBAG

State / Union Territory: JHARKHAND

Pincode / Zip code: 825311

Country Name: 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: +91 Area/STD Code: Telephone / Mobile number: 9153561247

Email ID: RATHOI993@GMAIL.COM

10 Status of applicant

Please select status, ☑ as applicable

☑ Individual ☐ Hindu undivided family ☐ Company ☐ Partnership Firm ☐ Government

☐ Trusts ☐ Body of Individuals ☐ Local Authority ☐ Artificial Juridical Persons ☐ Association of Persons ☐ Limited Liability Partnership

11 Registration Number (for company, firms, LLPs etc.)

12 In case of a person, who is required to quote Aadhar number or the Enrolment ID of Aadhar application form as per section 139 AA

Please mention your AADHAAR number (if allotted) 240654075184

If AADHAAR number is not allotted, please mention the enrolment ID of Aadhaar application form

Name as per AADHAAR letter or card or as per the Enrolment ID of Aadhaar application form

SUSHIL KUMAR

13 Source of Income *Please select, ☑ as applicable*

☐ Salary

☐ Income from Business / Profession Business/Profession code ☐☐ [For Code: Refer instructions]

☐ Income from House property

☐ Capital Gains

☐ Income from Other sources

☐ No income

14 Representative Assessee (RA)

Full name, address of the Representative Assessee, who is assessible 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), Proof of Address (POA) and Proof of Date of Birth (POB)

I/We have enclosed AADHAAR CARD ISSUED as proof of identity, AADHAAR CARD ISSUED as proof of address and AADHAAR CARD ISSUED 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 SUSHIL KUMAR, 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.

Place : HAZARIBAG

Date : D D M M Y Y Y Y — 0 3 0 7 2 0 2 5

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

भारत सरकार
Government of India



सुशील कुमार
Sushil Kumar
जन्म तिथि / DOB : 21/08/1994
पुरुष / Male

2406 5407 5184

आधार - आम आदमी का अधिकार

आधार
Unique Identification Authority of India

पता:
S/O: ज्ञान चाँद महतो, सिकरी, बरकागांव, हजारीबाग, झारखण्ड, 825311

Address:
S/O: Gyan Chand Mahto, Sikri, Barkagaon, Hazaribagh, Jharkhand, 825311

2406 5407 5184

1947
1800 300 1947

help@uidai.gov.in

www.uidai.gov.in

सुशील कुमार

9153561247