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

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

Affix Left Thumb impression across this photo

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

Assessing officer (AO code)

Area code	AO type	Range code	AO No.

अध्यक्ष सचिव
आत्मनिर्भर पुरूष बचत गट
खडांबे खु।, ता. राहुरी, जि. अहिल्यानगर

Sir,

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

I/We give below necessary particulars:

अध्यक्ष सचिव
आत्मनिर्भर पुरूष बचत गट
खडांबे खु।, ता. राहुरी, जि. अहिल्यानगर

Signature / Left Thumb Impression

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: ATMANIRBHAR PURUSH

First Name: BACHAT

Middle Name: GAT

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

ATMANIRBHAR PURUSH BACHAT GAT

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: 02 Month: 08 Year: 2025

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 provide 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:

First Name:

Middle Name:

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.: GAVTHAN

Name of Premises / Building / Village: KHADAMBE KH

Road / Street / Lane/Post Office: KHADAMBE KH

Area / Locality / Taluka/ Sub- Division: RAHURI

Town / City / District: AHMEDNAGAR

State / Union Territory: MAHARASHTRA

Pincode / Zip code: 413704

Country Name: INDIAN

Office Address

Name of office	ATMANIRBHR PURUSH BACHAT
Flat / Room / Door / Block No.	GAVATHAN
Name of Premises / Building / Village	KHADAMBE ICH
Road / Street / Lane/Post Office	KHADAMBE KH
Area / Locality / Taluka/ Sub- Division	RAHURI
Town / City / District	AHMEDNAGAR
State / Union Territory	MAHARASHTRA
Pincode / Zip code	413704
Country Name	INDIAN

8 Address for Communication ☐ Residence ☐ Office (Please tick as applicable)

9 Telephone Number & Email ID details

Country code | Area/STD Code | Telephone / Mobile number: 7558325877

Email ID: pawar.anil4@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 or the Enrolment ID of Aadhaar application form as per section 139 AA

Please mention your AADHAAR number (if allotted)

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

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 AADHAR CARD as proof of identity, AADHAR CARD as proof of address and AADHAR 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 ATMANIRBHAR PURUSH BACHAT the applicant, in the capacity of ____ do hereby declare that what is stated above is true to the best of my/our information and belief.

Place : KHADAMBE ICH.

Date : D D M M Y Y Y Y — 02 08 2025

अध्यक्ष / सचिव

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

आत्मनिर्भर पुरुष बचत गट
खडांबे खु।, ता. राहुरी, जि. अहिल्यानगर

सत्यमेव जयते
भारत सरकार

आधार

भारतीय विशिष्ट ओळख प्राधिकरण

भारत सरकार

Unique Identification Authority of India

Government of India

नोंदविण्याचा क्रमांक / Enrollment No.: 2722/94007/55664

To,
अतिश विनायक पवार
Atish Vinayak Pawar
Khadambe Khurd Tal-rahuri Khadambe Khurd
Vambori Ahmadnagar
Maharashtra 413704
9860847649

13/07/2011

Ref: 7214 / 10P / 194887 / 194892 / P

SB920591111FH

आपला आधार क्रमांक / Your Aadhaar No. :

7339 6912 6954

माझे आधार, माझी ओळख

भारत सरकार
Government of India



अतिश विनायक पवार
Atish Vinayak Pawar
जन्म तारीख / DOB : 04/02/1985
पुरुष / Male

7339 6912 6954

माझे आधार, माझी ओळख

आत्मनिर्भर पुरुष बचत गट

मु.पो. खडांबे खुर्द. ता. राहुरी जि. अहमदनगर

जा.क्र. ०१/२०२५ दिनांक. ०३/०८/२०२५

ठरावाची सत्यप्रत

आज दिनांक ०३/०८/२०२५ रोजी पुर्व सूचनेनुसार बचत गटाच्या कार्यालयात बचत गटाचे अध्यक्ष श्री अतिष विनायक पवार यांचे अध्यक्षतेखाली सभा घेण्यांत येवून त्यात खालील प्रमाणे ठराव पारीत करण्यात आले.

विषय क्र. :- बचत गटाचे पॅन कार्ड काढणे बाबत..

ठराव क्र. ०१/२०२५ :- वरील विषयावर सांगोपांग चर्चा होवून असे ठरले की, आपल्या बचत गटाचे आत्मनिर्भर पुरुष बचत गट बॅक खात्यावर व्यवहार करण्यासाठी पॅनकार्ड नसल्यामुळे अडचणी निर्माण होत आहेत. तरी आपल्या बचत गटाचे पॅन कार्ड काढणे बाबत आवश्यक त्या कागदपत्रांची पुर्तता बचत गटाचे अध्यक्ष श्री अतिष विनायक पवार यांनी करुन पॅन कार्ड काढुन घ्यावे व त्यानंतर सदर खात्यावर व्यवहार करावा असा ठराव मांडण्यात आला व त्यास सर्वानी सहमती दर्शवून ठराव सर्वानुमते पारीत करण्यात आला.

सुचक :- श्री विशाल प्रभाकर ठुबे

अनुमोदक :- श्री संतोष चंद्रकांत ओहळ

"ठराव सर्वानुमते मंजुर"

सभासद यादी

अ.क्र.	सभासदाचे पूर्ण नांव	हुद्दा	सही /अंगठा
१	श्री अतिष विनायक पवार	अध्यक्ष	

२	श्री अनिल मार्कस पवार	सचिव	
३	श्री बबन जनाजी पवार		
४	श्री सुधिर हरिदास पवार		
५	श्री सचिन सुरेश पाटोळे		
६	श्री संतोष चंद्रकांत ओहळ		
७	श्री विशाल प्रभाकर ठुबे		
८	श्री शेखर बाळासाहेब पवार		
९	श्री दिपक डॉमनिक मकासरे		
१०	श्री अशुतोष रामदास पवार		
११	श्री सुरज शाम पवार		
१२	श्री संजय भाऊसाहेब साळवे		
१३	श्री शषिकांत सुधाकर पवार		
१४	श्री राजेश संजय पवार		

१५ श्री प्रविण सुरेश साळवे

१६. आकाश शरद पवार