

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



Permanent Account Number (PAN)

A A T P S 6 3 9 4 A

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

Signature / Left thumb impression

☑ **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: SHAIKH

First Name: HASEENAKHATUN

Middle Name: MOHAMMADSALIM

Name you would like it printed on the PAN card

HASEENAKHATUN MOHAMMADSALIM SHAIKH

☐ **2 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: KHAN

First Name: ABDULGAFFAR

Middle Name:

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)**

☑ **3 Date of Birth/Incorporation/Agreement/Partnership/Trust Deed/ Formation of Body of individuals or Association of Persons**

Day: 01 Month: 07 Year: 1969

☐ **4 Gender (for 'Individual' applicant only)** ☐ **Male** ☑ **Female** ☐ **Transgender** ***(Please tick as applicable)***

☐ **5 Photo Mismatch**

☐ **6 Signature Mismatch**

☐ **7 Address for Communication** ☑ **Residence** ☐ **Office** ***(Please tick as applicable)***

Name of Office (to be filled only in case of office address):

Flat/Room/ Door / Block No.: RAFIK NAGAR

Name of Premises/ Building/Village: NEAR BABE REHMAT MASJID

Road/Street/ Lane/Post Office: SHIVAJI NAGAR

Area / Locality / Taluka / Sub- Division: GOVANDI

Town / City / District: MUMBAI

State / Union Territory: MAHARASHTRA Pincode / Zip code: 400043 Country Name: 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: Telephone / Mobile number: 8652691744

Email ID: RK9820899484@GMAIL.COM

☐ **10 AADHAAR number (if allotted)** 229527855809

Name as per AADHAAR letter/card: HASEENAKHATUN MOHAMMADSALIM SHAIKH

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

PAN 1: PAN 2: PAN 3: PAN 4:

12 Verification

I/We HASEENAKHATUN MOHAMMADSALIM SHAIKH 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 1 (number of documents) in support of proposed changes / corrections.

Place: MUMBAI

Date (D D M M Y Y Y Y): 12 07 2025

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

Note: As per provisions of Section 272B of the Income Tax Act., 1961, a penalty of ₹ 10,000 can be levied on possession of more than one PAN.

भारत सरकार

आधार

भारतीय विशिष्ट ओळख प्राधिकरण

भारत सरकार

Unique Identification Authority of India

Government of India

नोंदविण्याचा क्रमांक / Enrollment No.: 2006/60035/93902

To
हसीनाखातून मोहम्मदसलिम शेख
Haseenakhatun Mohammadsalim Shaikh
C/O Mohammadsalim Shaikh
Rafik Nagar .
Near Babe Rehmat Masjid Shivaji Nagar Govandi
Mumbai
Shivaji Nagar
Kurla Mumbai Suburban
Maharashtra 400043
8976983489

06/08/2016

1532185595

ME532185959FH

आपला आधार क्रमांक / Your Aadhaar No. :

2295 2785 5809

माझे आधार, माझी ओळख

भारत सरकार
Government of India



हसीनाखातून मोहम्मदसलिम शेख
Haseenakhatun Mohammadsalim Shaikh
जन्म तारीख / DOB : 01/07/1969
स्त्री / Female

2295 2785 5809

माझे आधार, माझी ओळख