

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	N	E	-	W	-	5	2	9	6

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: WAGH

First Name: LAHANU

Middle Name: BALA

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

LAHANU BALA WAGH

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: WAGH

First Name: LAHANU

Middle Name: BALA

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	Month	Year
01	01	1941

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: WAGH

First Name: BALA

Middle Name: BALWANTA

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.:

Name of Premises / Building / Village:

Road / Street / Lane/Post Office: JEUR

Area / Locality / Taluka/ Sub- Division: NAGAR

Town / City / District: AHMEDNAGAR

State / Union Territory: MAHARASHTRA

Pincode / Zip code: 414601

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: 8007164547

Email ID: AARAVIPAN@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 Aadhaar number or the Enrolment ID of Aadhaar application form as per section 139 AA

Please mention your AADHAAR number (if allotted) 863011301550

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

LAHANU BALA WAGH

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 as proof of identity, AADHAR as proof of address and AADHAR 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 LAHANU BALA WAGH, the applicant, in the capacity of HIMSELF do hereby declare that what is stated above is true to the best of my/our information and belief.

Place: JEUR

Date : D D M M Y Y Y Y — 1 0 0 3 2 0 2 6

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
Government of India

आधार



Aadhaar no. issued: 07/10/2011

लहानू बाळा वाघ
Lahanu Bala Wagh
जन्म तारीख/DOB: 01/01/1941
पुरुष/ MALE

आधार हा ओळखीचा पुरावा आहे, नागरिकत्व किंवा जन्मतारखेचा नाही.
हे फक्त पडताळणीसाठी वापरले जावे (ऑनलाइन प्रमाणीकरण किंवा QR कोडचे स्कॅनिंग/ ऑफलाइन XML)
Aadhaar is proof of identity, not of citizenship or date of birth. It should be used with verification (online authentication, or scanning of QR code / offline XML).

8630 1130 1550

माझे आधार, माझी ओळख

भारतीय विशिष्ट ओळख प्राधिकरण
Unique Identification Authority of India

AADHAAR

पत्ता:
C/O लहानू बाळा वाघ, गवारे वस्ती जवळ, वाघ वस्ती,जेऊर बा., जेऊर, अहमदनगर,
महाराष्ट्र - 414601

Address:
C/O Lahanu Bala Wagh, NEAR GAVARE VASTI, WAGH VASTIJEUR BA., Jeur, DIST: Ahmadnagar, Maharashtra - 414601

Details as on: 10/03/2026



8630 1130 1550

VID : 9160 7434 8568 7332

1947 | help@uidai.gov.in | www.uidai.gov.in