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

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

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Sign / Left Thumb impression across this photo

अध्यक्ष
महिला स्वयं सहाय्यता महिला समुह
खडांबे खुर्द,ता.राहुरी,जि.अहमदनगर

सचिव
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Signature / Left Thumb Impression

Assessing officer (AO code)

Area code	AO type	Range code	AO No.
P	NE	W-52	91

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: MALGANGA SOYM SAHAYYTA

First Name: MAHILA

Middle Name: SAMUH

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

MALGANGA SOYM SAHAYYTA MAHILA SAMUH

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	Month	Year
13	08	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.:

Name of Premises / Building / Village: KHADAMBE KH

Road / Street / Lane/Post Office: KHADAMBE

Area / Locality / Taluka/ Sub- Division: RAHURI

Town / City / District: AHMEDNAGAR

State / Union Territory: MAHARASHTRA

Pincode / Zip code: 413704

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: 9975711188

Email ID: SK.Ichadambe@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 _____ as proof of identity, _____

as proof of address and _____ 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 _____, 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.

अध्यक्ष सचिव

मळगंगा स्वयं सहाय्यता महिला समूह

खडांबे खुर्द, ता. राहुरी, जि. अहमदनगर

Place :

Date : D D M M Y Y Y Y

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

गटाचा ठराव

~~विषय~~ अर्जदार - मळगंगा स्वयमसहायंता गटाच्या सर्व महिला.

विजय - गटाचे पॅनकार्ड काढण्या बाबत

महोदय

वरील विषयास अनुसरुन विनंती अर्ज करतो की आम्ही मळगंगा स्वयमसहायंता महिला बचत गटाचे सदस्य म्हणन गटात आहे तरी आम्हाला बकेचे व्यवहार करण्यास अडचण होत आहे तरी आम्हाला पुढील व्यवहार सुरळीत होण्यासाठी गटाचे पॅनकार्ड काढुन ~~मिळावे~~ मिळावे. ही विनंती

आपले विश्वासु
सर्व महिला.

सर्व सदस्य महिला

① ओमेला विजय दुबे - दुबे ओमेला.
② रत्नमाला नवनाथ भागीवत - R.N.Bhgiywant
③ सपना संदिप साळवे - Salve.S.C.
④ सुनिता गणपत नन्नवरे -
⑤ लताबाई लक्ष्मण नन्नवरे -
⑥ कल्पना लुमेश नन्नवरे - Nnnavare.K.L.
⑦ सविता संजय मोरे - रांधावा सदंरा नो है.
⑧ खुशरत शौकत पठाण -
⑨ रेश्मा अल्ला अल्लाफ पठाण - रेश्मा पठाण
⑩ वैशाली नामदेव रवंकर - Kalekar.V.N.
⑪ कावेरी दुर्योधन कलापुरे - Kalhpure.K.D.
⑫ सुमन विलास लखे - लाखे. सु. वि.
⑬ रेखा नंदु जाधव - रेखा. नंदु. जाधव

स्थापना

दुबे ओमेला
अध्यक्ष

R.N.Bhgiywant
सचिव

मळगंगा स्वयं सहायता महिला समूह
खडांबे खुर्द, ता. राहुरी, जि. अहमदनगर