

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



Permanent Account Number (PAN)

D X H P S 8 2 6 8 B

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	NOOR ALAM
Middle Name	ABDUL KARIM

Name you would like it printed on the PAN card

NOOR ALAM ABDUL KARIM 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	SHAIKH
First Name	ABDUL
Middle Name	KARIM

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 01 Year 1976

☐ **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.	NEAR BABE RAHMAT MASJID
Name of Premises/ Building/Village	MD. RAFIQE NAGAR PART-2
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: 9987179815

Email ID RK9820899484@GMAIL.COM

☐ **10 AADHAAR number (if allotted)** 740018287135

Name as per AADHAAR letter/card

NOOR ALAM ABDUL KARIM SHAIKH

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

PAN 1 **PAN 2** **PAN 3** **PAN 4**

12 Verification

I/We NOOR ALAM ABDUL KARIM 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: 17062025

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

भारत सरकार

आधार

भारत सरकार
Government of India

भारतीय विशिष्ट ओळख प्राधिकरण
Unique Identification Authority of India

नोंदणी क्रमांक:/ Enrolment No.: 2821/27086/05288

To
नूर आलंम अब्दुल करीम शेख
Noor Alam Abdul Karim Shaikh
S/O Abdul Karim Shaikh
Near Babe Rahmat Masjid
Md.Rafiqe Nagar Part-2, Shivajinagar, Govandi
Shivaji Nagar S.O
Mumbai Maharashtra - 400043
9987179815

Signature Not Verified

Digitally signed by UNIQUE IDENTIFICATION AUTHORITY OF INDIA
Date: 2021.[illegible] 14:16:47 UTC



आपला आधार क्रमांक / Your Aadhaar No. :

7400 1828 7135
VID : 9162 1231 3720 0601

माझे आधार, माझी ओळख

भारत सरकार
Government of India

आधार



नूर आलंम अब्दुल करीम शेख
Noor Alam Abdul Karim Shaikh
जन्म तारीख/DOB: 01/01/1974
पुरुष/ MALE

Issue Date: 21/07/2011

7400 1828 7135
VID : 9162 1231 3720 0601

माझे आधार, माझी ओळख