

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.
PNE	O	WO52	96

Sign / Left Thumb impression across the photo

Sir,

I/We hereby request that a permanent account number be allotted to me/us.
I/We give below necessary particulars:

R.S.Kadam

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: KADAM
First Name: ROHAN
Middle Name: SANTOSH

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

ROHAN SANTOSH KADAM

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
08	03	2011

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: KADAM
First Name: SANTOSH
Middle Name: SOPAN

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: AHILYANAGAR
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: 9067541120

Email ID: gaganpan@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) 809055120085

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

ROHAN
SANTOSH
KADAM

Please select, ☑ as applicable

13 **Source of Income**

☐ 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: KADAM

First Name: SANTOSH

Middle Name: SOPAN

Address

Flat / Room / Door / Block No.

Name of Premises / Building / Village: JEUR

Road / Street / Lane/Post Office: JEUR

Area / Locality / Taluka/ Sub- Division: NAGAR

Town / City / District: AHILYANAGAR

State / Union Territory: MAHARASHTRA

Pincode: 414601

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 ROHAN SANTOSH KADAM, 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 — 28 08 2025

R.S. kadam

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


भारत सरकार
Government of India
Issue Date: 16/08/2018
रोहन संतोष कदम
Rohan Santosh Kadam
जन्म तारीख/DOB: 08/03/2011
पुरुष/ MALE
8040 5512 0085
VID : 9170 7368 9826 6673
माझे आधार, माझी ओळख


भारतीय विशिष्ट ओळख प्राधिकरण
Unique Identification Authority of India
पत्ता:
आत्मज: संतोष कदम, कदम गल्ली, जेउर, अहमदनगर, महाराष्ट्र - 414601
Address:
S/O: Santosh Kadam, Kadam Galli, Jeur, Ahmadnagar, Maharashtra - 414601
Download Date: 11/03/2022
8040 5512 0085
VID : 9170 7368 9826 6673
help@uidai.gov.in
www.uidai.gov.in

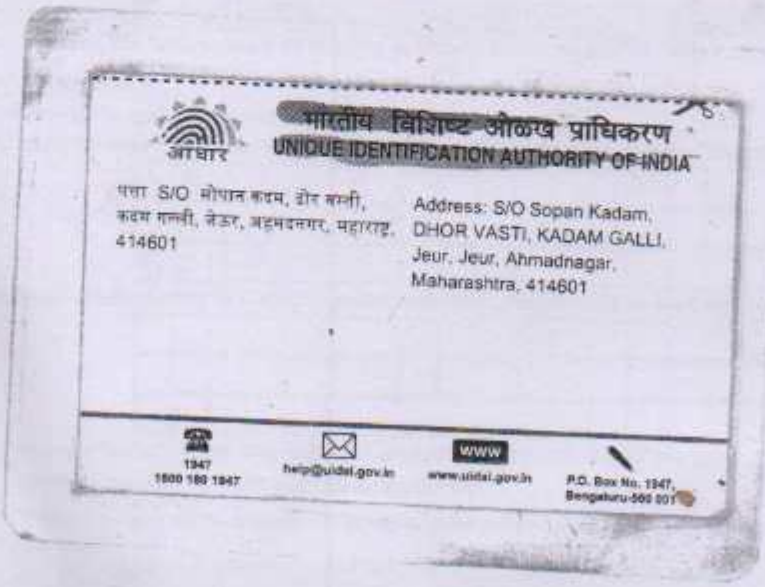
S. S. Kadam


भारत सरकार
GOVERNMENT OF INDIA

संतोष सोपान कदम
Santosh Sopan Kadam
जन्म वर्ष / Year of Birth : 1985
पुरुष / Male

8018 2700 3089

आधार — सामान्य माणसाचा अधिकार


आधार

भारतीय विशिष्ट ओळख प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पत्ता S/O सोपान कदम, डोर वस्ती, कदम गल्ली, जेउर, अहमदनगर, महाराष्ट्र, 414601

Address: S/O Sopan Kadam, DHOR VASTI, KADAM GALLI, Jeur, Jeur, Ahmadnagar, Maharashtra, 414601

1947
1800 180 1947
help@uidai.gov.in
www
www.uidai.gov.in
P.O. Box No. 1947, Bengaluru-560 001

S. S. Kadam