

Signature / Left thumb impression across this photo

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



Permanent Account Number (PAN)

B	O	T	P	A	3	6	8	3	M

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: NOORUDDIN
First Name: SHAHANAJ
Middle Name: BEGAM

Name you would like it printed on the PAN card

SHAHANAJA BEGAM NOORUDDIN

☑ **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: AHMAD
First Name: JAMIL
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: 05 Year: 1986

☐ **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.: BABA NAGAR
Name of Premises/ Building/Village: RAFIQ NAGAR PART NO 2
Road/Street/ Lane/Post Office: NEAR BABE REHMAT MASJID
Area / Locality / Taluka / Sub- Division: GOVANDI WEST SHIVAJI NAGAR
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: 9702609880

Email ID: RK98208994846@GMAIL.COM

☐ **10 AADHAAR number (if allotted)** 371789330018

Name as per AADHAAR letter/card: SHAHANAJ BEGAM NOORUDDIN

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

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

12 Verification

I/We SHAHNAJ BEGAM NOORUDDIN 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): 02 01 2026

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.

सत्यमेव जयते
भारत सरकार

आधार

भारत सरकार
Government of India

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

Enrollment No. : 2821/27027/01550

To
Shahanaj Begam Nooruddin

W/O: Nooruddin,
Baba Nagar,
Rafiq Nagar Part No 2,
Near Babe Rehmat Masjid,
Govandi West,
VTC: Mumbai, PO: Shivaji Nagar,
Sub District: Mumbai, District: Mumbai,
State: Maharashtra, PIN Code: 400043.
Mobile: 9702609880

738690803

KF738690803FI

आपका आधार क्रमांक / Your Aadhaar No. :

3717 8933 0018

मेरा आधार, मेरी पहचान

भारत सरकार
Government of India

आधार



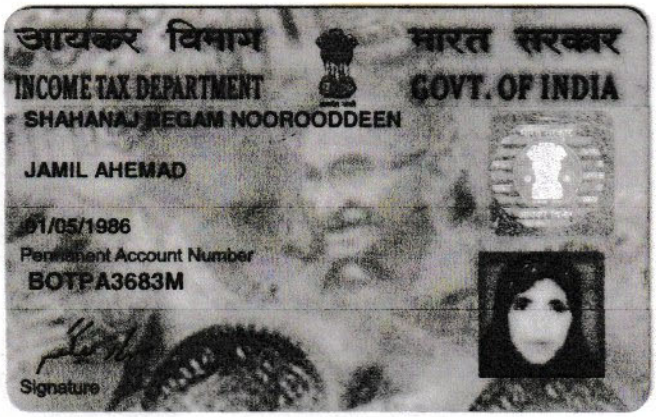
Issue Date: 21/01/2015

Shahanaj Begam Nooruddin
DOB: 01/05/1986
Female

3717 8933 0018

मेरा आधार, मेरी पहचान

شہناز بیگم


आयकर विभाग
भारत सरकार
INCOME TAX DEPARTMENT
GOVT. OF INDIA
SHAHANAJ BEGAM NOOROODDEEN
JAMIL AHEMAD
01/05/1986
Permanent Account Number
BOTPA3683M
Signature

شہناز بیگم