

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



Permanent Account Number (PAN)

N Z M P S 0 2 3 0 J

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: HUSSAIN

First Name: SHAIKH MOHD SABIR

Middle Name: HUSSAIN KABEER

Name you would like it printed on the PAN card

SHAIKH MOHD SABIR HUSSAIN KABEER HUSSAIN

☑ **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: KABEER

Middle Name: HUSSAIN

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: 13 Month: 04 Year: 2006

☐ **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: PART NO. 2 BABERFHMAT MASJ

Name of Premises/ Building/Village: I D, RAFIQUE NAGAR

Road/Street/ Lane/Post Office: GOVANDI

Area / Locality / Taluka / Sub- Division: SHIVAJI NAGAR

Town / City / District: MUMBAI SUBURBAN

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: 9136582845

Email ID: RK98208994840@GMAIL.COM

☐ **10 AADHAAR number (if allotted)** 478730306516

Name as per AADHAAR letter/card: SHAIKH MOHD SABIR HUSSAIN KABEER HUSSAIN

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

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

12 Verification

I/We SHAIKH MOHD SABIR HUSSAIN KABEER HUSSAIN, 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 — 27 12 2025

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.: 0854/02070/04300

To
Shaikh Mohd Sabir Hussain Kabeer Hussain
C/O Kabeer Hussain Shaikh,
PART NO.2, BABEREHMAT MASJID, , RAFIQUE NAGAR, ,
GOVANDI, ,
VTC: Mumbai,
PO: Shivaji Nagar,
Sub District: Kurla, District: Mumbai Suburban,
State: Maharashtra,
PIN Code: 400043,
Mobile: 9136582845

151281549

MH512815491FL

आपका आधार क्रमांक / Your Aadhaar No. :

4787 3030 6516

मेरा आधार, मेरी पहचान

भारत सरकार
Government of India

आधार



Aadhaar no. issued: 15/11/2011

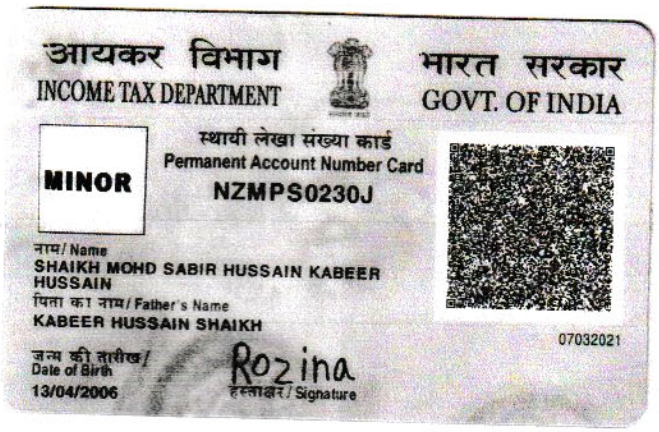
Shaikh Mohd Sabir Hussain Kabeer Hussain
DOB : 13/04/2006
Male

आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं।
इसका उपयोग सत्यापन (ऑनलाइन प्रमाणीकरण, या क्यूआर कोड/ऑफ़लाइन एक्सएमएल की स्कैनिंग) के साथ किया जाना चाहिए।

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).

4787 3030 6516

मेरा आधार, मेरी पहचान


आयकर विभाग
INCOME TAX DEPARTMENT
भारत सरकार
GOVT. OF INDIA
MINOR
स्थायी लेखा संख्या कार्ड
Permanent Account Number Card
NZMPS0230J
नाम/ Name
SHAIKH MOHD SABIR HUSSAIN KABEER HUSSAIN
पिता का नाम/ Father's Name
KABEER HUSSAIN SHAIKH
07032021
जन्म की तारीख/ Date of Birth
13/04/2006
Rozina
हस्ताक्षर / Signature