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

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

M.A.Dhoos सचिव अध्यक्षा
श्री. मळगंगा महिला बचत गट
देवळाली वरा, ता. राहुरी, जि. अ नगर

Sign / Left Thumb impression across this photo

Assessing officer (AO code)

Area code	AO type	Range code	AO No.
PNE	W	52	91

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Signature / Left Thumb Impression

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: SHRI MALGANGA MAHILA

First Name: BACHAT GAT

Middle Name:

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

SHRI MALGANGA MAHILA BACHAT GAT

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: 22 Month: 11 Year: 2007

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: DEOLALI PRAVARA

Road / Street / Lane/Post Office: DEOLALI PRAVARA

Area / Locality / Taluka/ Sub- Division: RAHURI

Town / City / District: AHMEDNAGAR

State / Union Territory: MAHARASTRA Pincode / Zip code: 413716 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: 7558321617

Email ID: SACHG8@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)

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 M.A. Dhoos अध्यक्ष / सचिव / etc. do hereby declare that what is stated above is true to the best of my/our information and belief.

Place : DEOLALI PRAVARA

Date : D D M M Y Y Y Y — 1 6 0 3 2 0 2 6

सचिव अध्यक्षा
श्री. मळगंगा महिला बचत गट
देवळाली-प्रवरा, ता. राहुरी, जि. अ...

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.

स्वच्छ अमृत महोत्सव अंतर्गत स्वच्छ सर्वेक्षण 2021 आणि कचरा मुक्त शहर ह्यासाठी राष्ट्रीय पुरस्कार,
राष्ट्रीय भुमीजल संवर्धन पुरस्कार,
महाराष्ट्र राज्य संत गाडगेबाबा नागरी स्वच्छता अभियानांतर्गत प्रथम क्रमांकाचे पारितोषिक

देवळाली प्रवरा नगरपरिषद, देवळाली प्रवरा

ता. राहुरी जि. अहिल्यानगर

स्थापना
दि. 15-02-1983

फोन नं. (02426) 260528

ई-मेल: deolalipravaraco@gmail.com

॥ कृषी विद्या उद्यम कला संस्कृतीची मांदियाळी । उभ्या भारता भुषण व्हावी आमुची देवळाली ॥

जा.क्र.NULM/०९/ ११९

दिनांक : ०४/०३/२०२६

वाचा : अध्यक्षा, श्री. मळगंगा महिला बचत गट,
यांचा अर्ज क्र. ७८१ दि.०२/०३/२०२६

दाखला

मुख्याधिकारी, देवळालीप्रवरा नगरपरिषद यांचे कडून दाखला देण्यात येतो कि, देवळाली प्रवरा शहरातील १० महिलांनी एकत्र येऊन श्री. मळगंगा महिला बचत गट, देवळाली प्रवरा ता. राहुरी जि.अहिल्यानगर हा बचत गट, १२/११/२००७ रोजी स्वयंप्रेरणेने स्थापन केलेला आहे.

सदर गटातील सर्व महिला देवळालीप्रवरा शहरातील रहिवासी असल्याने बचत गट चालविण्यास व PAN CARD काढण्यास त्यांचे विनंती अर्जा नुसार दाखला देण्यात येत आहे.

नगर पालिका कार्यालय • स्थापना १५/२/८२ • नी प्रवरा, ता. राहुरी, जि. अ. नगर

प्रशासकीय अधिकारी
देवळालीप्रवरा नगरपरिषद, देवळालीप्रवरा

M.A. Dhoos

सचिव

अध्यक्षा
श्री. मळगंगा महिला बचत गट
देवळालीप्रवरा, ता. राहुरी, जि. अ. नगर