

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



Permanent Account Number (PAN)

C G I P D 2 2 8 7 F

Please read Instructions 'h' & 'i' for selecting boxes on left margin of this form.

सोहनी देवी

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	D E V I
First Name	S O H N I
Middle Name	

Name you would like it printed on the PAN card

S O H N I D E V I

☐ **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	R A N A
First Name	B I G A N
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 1 0 Month 0 6 Year 1 9 8 7

☐ **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.	H A R A M
Name of Premises/ Building/Village	H A R A M
Road/Street/ Lane/Post Office	L I L A N A G A R
Area / Locality / Taluka / Sub- Division	S A D A R
Town / City / District	H A Z A R I B A G H

State / Union Territory: JHARKHAND | Pincode / Zip code: 8 2 5 3 0 2 | 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 | Area/STD Code | Telephone / Mobile number: - - - 9 3 0 4 2 7 0 4 8 4

Email ID: UTIPAN495@GMAIL.COM

☐ **10 AADHAAR number (if allotted)** 3 4 5 6 9 4 1 0 1 6 5 2

Name as per AADHAAR letter/card: S O H N I D E V I

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

PAN 1 | PAN 2 | PAN 3 | PAN 4

12 Verification

I/We SOHNI DEVI, 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.

I/We have enclosed 1 (number of documents) in support of proposed changes / corrections.

Place: HAZARIBAGH

Date: D D M M Y Y Y Y — 2 5 0 2 2 0 2 6

सोहनी देवी

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.

भारत सरकार
Government of India



सोहनी देवी
Sohni Devi
जन्म तिथि/DOB: 10/06/1957
महिला/ FEMALE

Issue Date: 10/10/2013

3456 9410 1652
VID : 9102 1424 5729 3095
मेरा आधार, मेरी पहचान

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

पता:
द्वारा: रामजतन यादव, गाँव हारम पो लीलानगर, हरम,
हजारीबाग,
झारखण्ड - 825302

Address:
C/O: Ramjatan Yadaw, vill haram po
lilanagar, Haram, Hazaribagh,
Jharkhand - 825302

Download Date: 24/02/2023

3456 9410 1652
VID : 9102 1424 5729 3095

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आयकर विभाग
INCOME TAX DEPARTMENT

भारत सरकार
GOVT OF INDIA

स्थायी लेखा संख्या कार्ड
Permanent Account Number Card

CGIPD2287E

नाम / Name
SOHWA DEVI

पिता का नाम / Father's Name
BIGAN RANA

जन्म की तारीख / Date of Birth
01/01/1955

सोहवा देवी

हस्ताक्षर / Signature