

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



Permanent Account Number (PAN)

I A Y P S 5 3 4 9 G

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	SONAWANE
First Name	SWAMY
Middle Name	POPAT

Name you would like it printed on the PAN card

SWAMY POPAT SONAWANE

☐ **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	SONAWANE
First Name	POPAT
Middle Name	FAKIRA

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	Month	Year
13	12	1995

☐ **4 Gender (for 'Individual' applicant only)** ☑ Male ☐ Female *(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.	DHAMORI KHURD
Name of Premises/ Building/Village	NEAR VAMBORI RAILWAY STATI
Road/Street/ Lane/Post Office	DHAMORI
Area / Locality / Taluka / Sub- Division	RAHURI
Town / City / District	AHMEDNAGAR

State / Union Territory	Pincode / Zip code	Country Name
MAHARASHTRA	413704	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
+91		7709476627

Email ID swamsonawane222@gmail.com

☐ **10 AADHAAR number (if allotted)** 454975089575

Name as per AADHAAR letter/card

SWAMY
POPAT
SONAWANE

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

PAN 1 **PAN 2** **PAN 3** **PAN 4**

12 Verification

I/We Adhar Card **, the applicant, in the capacity of** Adhar card **do hereby declare that what is stated above is true to the best of my/our information and belief.**

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

Place DHAMORI

Date D D M M Y Y Y Y — 01 11 2025

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


भारत सरकार
Government of India
आधार
स्वामी पोपट सोनवणे
Swamy Popat Sonawane
जन्म तारीख / DOB: 13/12/1995
पुरुष / Male
Issue Date: 03/06/2013
4549 7508 9575
मेरा आधार, मेरी पहचान


भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India
पता: धामोरी खुर्द, वंबोरी रेलवे स्टेशन के पास, धामोरी खुर्द,
अहमदनगर, महाराष्ट्र, 413704
Address: Dhamori khurd, Near Vambori
Railway Station, Dhamori Khurd,
Ahmadnagar, Maharashtra, 413704
Print Date: 15/06/2022
4549 7508 9575
1947
help@uidai.gov.in
www.uidai.gov.in


आयकर विभाग
INCOME TAX DEPARTMENT
भारत सरकार
GOVT. OF INDIA
स्थायी लेखा संख्या कार्ड
Permanent Account Number Card
IAYPS5349G
नाम / Name
SWAMI POPAT SONAWANE
पिता का नाम / Father's Name
POPAT FAKIRA SONAWANE
जन्म की तारीख / Date of Birth
13/12/1995
हस्ताक्षर / Signature
23092020