

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



Assessing officer (AO code)

Area code	AO type	Range code	AO No.
PNE	OW	052	96

Sir,

I/We hereby request that a permanent account number be allotted to me/us.
I/We give below necessary particulars:

Signature / Left Thumb Impression

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	CHAYAN
First Name	SWAPNIL
Middle Name	ASHOK

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

SWAPNIL ASHOK CHAYAN

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	Month	Year
15	05	2010

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	CHAYAN
First Name	ASHOK
Middle Name	SAMPAT

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	BAHIRWADI
Road / Street / Lane/Post Office	JEUR
Area / Locality / Taluka/ Sub- Division	NAGAR
Town / City / District	AHILYANAGAR

State / Union Territory	Pincode / Zip code	Country Name
MAHARASHTRA	414601	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: 9637573930

Email ID:

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) 389101337809

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

SWAPNIL
ASHOK
CHAVAN

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: CHAVAN

First Name: ASHOK

Middle Name: SAMPAT

Address

Flat / Room / Door / Block No.

Name of Premises / Building / Village: BAHIRWADI

Road / Street / Lane/Post Office: JEUR

Area / Locality / Taluka/ Sub- Division: NAGAR

Town / City / District: AHILYANAGAR

State / Union Territory: MAHARASHTRA

Pincode: 414601

15 **Documents submitted as Proof of Identity (POI), Proof of Address (POA) and Proof of Date of Birth (POB)**

I/We have enclosed AADHAR as proof of identity, AADHAR as proof of address and AADHAR 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 SWAPNIL ASHOK CHAVAN, 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.

Place: JEUR

Date: D D M M Y Y Y Y — 31 03 2025

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



भारत सरकार
Government of India

स्वप्निल अशोक चव्हाण
Swapnil Ashok Chavan
जन्म तारीख/DOB: 15/05/2010
पुरुष/ MALE

आधार हा ओळखीचा पुरावा आहे, नागरिकत्व किंवा जन्मतारखेचा नाही.
हे तपासण्यासाठी वापरावे जसे (ऑनलाइन प्रमाणीकरण किंवा QR कोडचे स्कॅनिंग/ ऑफलाइन XML)
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).

Aadhaar no. issued: 07/12/2013

3841 0133 7809

माझे आधार, माझी ओळख



भारतीय विशिष्ट ओळख प्राधिकरण
Unique Identification Authority of India

पत्ता:
S/O: अशोक चव्हाण, बहीरवाडी, जेऊर, अहमदनगर, महाराष्ट्र - 414601

Address:
S/O: Ashok Chavan, Bahirwadi, PO: Jeur, DIST: Ahmadnagar, Maharashtra - 414601

Details as on: 17/12/2014

3841 0133 7809

VID : 9117 8262 5721 9440

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