

Sign / Left thumb impression across this photo

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.
P N E	O	W 0 5 2	9 6

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: MAGAR
First Name: VAISHNAVI
Middle Name: SHASHIKANT

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

VAISHNAVI SHASHIKANT MAGAR

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: 26 Month: 07 Year: 2015

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: MAGAR
First Name: SHASHIKANT
Middle Name: HANUMANT

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: JEUR
Road / Street / Lane/Post Office: JEUR
Area / Locality / Taluka/ Sub- Division: NAGAR
Town / City / District: AHILYANAGAR
State / Union Territory: MAHARASHTRA
Pincode / Zip code: 414601
Country Name: INDIA

Office Address

Name of office

Flat / Room / Door / Block No.

Name of Premises / Building / Village: JEUR

Road / Street / Lane/Post Office: JEUR

Area / Locality / Taluka/ Sub- Division: NAGAR

Town / City / District: AHILYANAGAR

State / Union Territory: MAHARASHTRA

Pincode / Zip code: 414601

Country Name: INDIA

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: 7719020056

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 Partne

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): 317812177343

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

VAISHNAVI SHASHIKANT MAGAR

13 Source of Income *Please select, ✓ as applica*

☐ Salary

☐ Income from Business / Profession Business/Profession code [For Code: Refer Instructions]

☐ Income from House property

☐ Capital Gains

☐ Income from Other source

☑ 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 hav 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: MAGAR

First Name: SHASHIKANT

Middle Name: HANUMANT

Address

Flat / Room / Door / Block No.

Name of Premises / Building / Village: JEUR

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 VAISHNAVI SHASHIKANT MAGAR the applicant, in the capacity of HERSELF 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): 18092025

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.

आधार

भारतीय विशिष्ट पहचान प्राधिकरण

भारत सरकार
Unique Identification Authority of India
Government of India

नामांकन क्रम / Enrollment No 2033/80221/62422

To,
vaishnavi shashikant magar
vaishnavi shashikant magar
D/O Vaishali Shashikant Magar
jeur
Jeur
Jeur Nagar Ahmadnagar
Maharashtra 414601

04/10/2016

Ref: 485 / 08V / 115878 / 116220 / P

SA441857006FT

आपका आधार क्रमांक / Your Aadhaar No. :

3178 1217 7343

मेरा आधार, मेरी पहचान

भारत सरकार
Government of India



vaishnavi shashikant magar
vaishnavi shashikant magar
माता : वैशाली शशिकांत मगर
Mother : Vaishali Shashikant Magar
जन्म तिथि / DOB : 29/07/2015
महिला / Female

3178 1217 7343

मेरा आधार, मेरी पहचान


भारत सरकार
GOVERNMENT OF INDIA
शशिकांत हनुमंत मगर
Shashikant Hanumant Magar
जन्म वर्ष / Year of Birth : 1973
पुरुष / Male
4235 7706 1021
आधार – सामान्य माणसाचा अधिकार


आधार
पत्ता: S/O हनुमंत मगर, मगर मळा, जेऊर बा., जेऊर, अहमदनगर, महाराष्ट्र, 414601
Address: S/O Hanumant Magar, MAGAR MALA, JEUR BA., Jeur Jeur, Ahmadnagar, Maharashtra 414601
1947
1800 180 1947
www