

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	T	N	W		S	7		1	

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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: KUMAR

First Name: VISHAL

Middle Name:

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

VISHAL KUMAR

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 (please tick as applicable)

5 Date of Birth/Incorporation/Agreement/Partnership or Trust Deed/ Formation of Body of individuals or Association of Persons

Day: 01 Month: 01 Year: 2009

6 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: CHAUDHARY

First Name: BADRINATH

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)*

7 Address

Residence Address

Flat / Room / Door / Block No.: WARD 04

Name of Premises / Building / Village: CHORKA PANDARIYA

Road / Street / Lane/Post Office: BARKAGAON

Area / Locality / Taluka/ Sub- Division: BARKAGAON

Town / City / District: HAZARIBAG

State / Union Territory: JHARKHAND

Pincode / Zip code: 825311

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: + 9 1

Area/STD Code

Telephone / Mobile number

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 Aadhar number or the Enrolment ID of Aadhar application form as per section 139 AA

Please mention your AADHAAR number (if allotted) 218841225425

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: VISHAL KUMAR

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: DEVI

First Name: BABITA

Middle Name

Address

Flat / Room / Door / Block No.: WARD 04

Name of Premises / Building / Village: CHORKA PANDARIYA

Road / Street / Lane/Post Office: BARKAGAON

Area / Locality / Taluka/ Sub- Division: HAZARIBAGH

Town / City / District: HAZARIBAGH

State / Union Territory: JHARKHAND

Pincode: 825311

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

I/We have enclosed AADHAAR CARD ISSUED as proof of identity, AADHAAR CARD ISSUED 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 VISHAL KUMAR, the applicant, in the capacity of HIMSELF/HERSELF do hereby declare that what is stated above is true to the best of my/our information and belief.

Place : HAZARIBAG

Date : D D M M Y Y Y Y — 2 7 0 4 2 0 2 5

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


भारत सरकार
GOVERNMENT OF INDIA
बबिता देवी
Babita Devi
जन्म वर्ष / Year of Birth : 1986
महिला / Female
8858 5567 2377
आधार – आम आदमी का अधिकार
भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA
पता: W/O: बद्रिनाथ चौधरी, 78, वॉर्ड न-02, सिरमा, चोरका, सिरमा, हजारीबाग, बरकागांव, झारखण्ड, 825311
Address: W/O: Badrinath Choudhri, 78, ward no-02, sirma, chorka, Sirma, Hazaribagh, Barkagaon, Jharkhand, 825311
1947
1800 180 1947
help@uidai.gov.in
www.uidai.gov.in
P.O Box No.1947, Bengaluru-560 001

बबिता देवी



भारत सरकार
GOVERNMENT OF INDIA

विशाल कुमार
Vishal Kumar
जन्म तिथि/ DOB: 01/01/2009
पुरुष / MALE

2188 4122 5425

आधार-आम आदमी का अधिकार



भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता:
आत्मज: बद्रिनाथ चौधरी,
चोरका, बडकागाँव, सिरमा,
हजारीबाग,
झारखण्ड - 825311

Address:
S/O: Badrinath Chaudhary, chorka,
barkagaon, Sirma, Hazaribagh,
Jharkhand - 825311

2188 4122 5425

Aadhaar-Aam Admi ka Adhikar

बबिता देवी - Vishal Kumar

9142700825

Vishal Kumar 9142700825@gmail.com