


**Tax Invoice cum Acknowledgement receipt of PAN Application (Form 49A)**

<b>Tax Invoice cum Acknowledgement Number</b>	N - 078539700000285		Date- 16 Feb 2018
<b>Category</b>	INDIVIDUAL	<b>GSTIN of Applicant</b>	NA
<b>Applicant's Name</b>	KAILASH		
<b>Name on Card</b>	KAILASH		
<b>Father's Name</b>	MUNNA SINGH		
<b>Date of Birth/ Incorporation</b>	10 Jul 1996	<b>PAN Card dispatch State</b>	UTTAR PRADESH (9)
<b>Telephone/ Mobile Number</b>	91-98-8536	<b>E-mail ID</b>	PAPPUS...BD@GMAIL.COM
<b>Proof of Identity</b>	AADHAAR Card issued by the Unique Identification Authority of India		
<b>Proof of Address</b>	AADHAAR Card issued by the Unique Identification Authority of India		
<b>Proof of DOB</b>	AADHAAR Card issued by the Unique Identification Authority of India		
On behalf of NSDL e-Governance Infrastructure Limited (PAN-Centre Managed by NSDL)		<b>PAN application fee</b>	₹93.00
Branch ID: 07853 Vertex Customer Solutions India Private Limited		<b>CGST 9%</b>	₹0.00
DIGITAL BUDDY INTERNET POINT H NO295, VILL LANKRI NEAR PRIMARY S LANKRI, PO- LANKRI FAZALPUR MORADABAD UTTAR PRADESH 244001		<b>SGST 9%</b>	₹0.00
		<b>IGST 18%</b>	₹16.74
		<b>Total(Rounded Off)</b>	<b>₹110.00</b>
<b>GSTIN:27AAACN2082N1Z8</b>		<b>CIN: U72900MH1995PLC095642</b>	<b>SAC : 998319</b>

This is a computer generated receipt and does not require signature.

Online PAAM 1.2

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: 02 Month: 03 Year: 2004

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: SINGH

First Name: RAMESH

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. H. NO. 112

Name of Premises / Building / Village LANKRI FAZALPUR

Road / Street / Lane/Post Office

Area / Locality / Taluka/ Sub- Division PAPPU PHOTO STUDIO

Town / City / District MORADABAD

State / Union Territory U.P. Pincode / Zip code 244001 Country Name INDIA

# INCOME-TAX RULES, 1962

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.
L K N	W	7 1	I

Sign / Left Thumb impression across this photo

रमेश सिंह

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

V I V E K

First Name

First name →

Middle Name

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

V I V E K

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    Month    Year  
02    02    2004

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

S I N G H

First Name

R A M E S H

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.

H. NO. 112

Name of Premises / Building / Village

LANKRI FAZALPUR

Road / Street / Lane/Post Office

PAPPU PHOTO STUDIO

Area / Locality / Taluka/ Sub- Division

MDRADA BAD

Town / City / District

State / Union Territory

Pincode / Zip code

Country Name

U.P.

244001

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

Area/STD Code

Telephone / Mobile number

091

9690XXXX56

Email ID

vivek@gmail.com

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 139AA,-

Please mention your AADHAAR number (if allotted):

7647XXXX583

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:

VIVEK

13 Source of Income

Salary

Income from Business / Profession

Business/Profession code

[For Code: Refer instructions]

Income from House property

Please select,  as applicable

Capital Gains

Income from Other sources

No income

14 Representative Assessee (RA)

Full name, address of the Representative Assessee, who is assessable 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

SINGH

First Name

RAMESH

Middle Name

Address

Flat / Room / Door / Block No.

LANKRI FAZALPUR

Name of Premises / Building / Village

LANKRI

Road / Street / Lane/Post Office

Area / Locality / Taluka/ Sub- Division

Town / City / District

MDRABAD

State / Union Territory

U.P.

Pincode

244001

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

I/We have enclosed

ADHAR

as proof of identity,

ADHAR

as proof of address and

ADHAR

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)

16 I/We

VIVEK

the applicant, in the capacity of

MYSELF

do hereby declare that what is stated above is true to the best of my/our information and belief.

Place :

MDRABAD

Date :

DDMMYY  
08022018

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

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



Government Of India



Unique Identification Authority Of India

# AADHAAR CARD

Name

xx xx xxx

D B /

xx xxx

xxx xxxx xxx

Address

xxx xxx

xxx xxx

xxx xxx

xxx xxx

xxx xxx

xxx xxxx xxx



Aadhaar - Aam Aadmi ka Adhikar

1947  
18003001947

help@uidai.gov.in

www.uidai.gov.in