



2099

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.
C H E		W I H 6	0 3

[Handwritten Signature]

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: G I L A R A

First Name: K A N A G A R A J

Middle Name:

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

K G I L A R A

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: 25 Month: Year: 2

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: D E V I

First Name:

Middle Name:

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. NO

Name of Premises / Building / Village KE... COLONY

Road / Street / Lane/Post Office V... T...

Area / Locality / Taluka/ Sub- Division ...

Town / City / District ...

State / Union Territory: TAMILNADU

Pincode / Zip code: ...

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: +91 Area/STD Code: Telephone / Mobile number: 8270338353

Email ID: cscsushababu@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 139 AA

Please mention your AADHAAR number (if allotted) 63

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

K GILARA

13 Source of Income Please select, as applicable

Salary Capital Gains

Income from Business / Profession Business/Profession code [For Code: Refer instructions] Income from Other sources

Income from House property 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

First Name

Middle Name

Address

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

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

I/We have enclosed Aadhaar as proof of identity, Aadhaar as proof of address and Aadhaar 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 K. Gilara, 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: Arakkonam

Date: 27/09/2023

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



இந்திய அரசாங்கம்

Government of India

க கிளரா

K Gilara



பிறப்பு: 1972

பெண்

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எனது ஆதார், எனது அடையாளம்



இந்திய தனித்துவமான அடையாள அமைப்பு

Unique Identification Authority of India

முகவரி: கணவர் பெயர்: 32, கீழ்காலனி, வெங்குபட்டு, வேலூர், வங்குபட்டு, தமிழ்நாடு, 631102

பெயர்: W/O: Kanagaraj, 32, COLONY, Vengupattu, Vengupattu, Tamil Nadu,

636



1947



help@uidai.gov.in



www.uidai.gov.in

Father Name : G. Devaraj