								U-K001193073 PY0004764129											Inward Number Bar Code										
						Hice	_	05/09/2023 15:54:39																					
User ID: OMGA995-OMG204 Amount:								Rs.:107.00/-										Application Date: 05/09/2023								ᆿ			
3.00 (1) (1) (1)								N-0.0110			020	믜																	
User Name: OMGA995-OMG204 Application Source: PSA - FYV - OMG ACTIVE INDIA																													
PAN Card Mode: Both physical PAN and e-PAN Card Application Mode: Physical Application																													
Request For New PAN Card Or/ And Changes Or Correction in PAN Data																													
Only 'Individuals' to affix recent photograph (3.5 cm × 2.5 cm)	А							rmanent Account Number (PAN)  S A P K 2 6 0 8 J												Only 'Individuals' to affix recent photograph (3.5 cm × 2.5 cm)						īx			
Please read Instructions 'h' & 'i' for selecting boxes on left margin of this form.  Signature/Left thumb impression across this photo																													
1 Full Name (Full expanded name to be mentioned as appearing in proof of identity/address documents: initials are not permitted)																													
Please select title,	✓ as ap	pplicable		~	Shi	ri	L	Sn	nt		_]۱	Kum	nari		L	M	s	L	96	100	07	Signa	ature/Le	ft thum	b impres	ssion	_		
Last Name / Surna	ame K	(H)	A N	Ī																									
First Name	М	10	н м	1 A	D				- 30						1						1								
Middle Name	F	- A	R I	D																	T								
Name you would li	ike it print	ted on	the P	AN c	ard	-8	-222	28		22	200	330	-10	25	W			36	700					- 22 -				(4)	202 - 202
M O H M A	D	F A	R	1 [	וכ	ŀ	( H	Α	N	26																			
2 Details of Pare Father's Nam	ents (applie	cable o	only fo	or ind	ivid	ual a	pplic	ants	), udd	fill	in f	athe	r'e	nan	10.0	nlv													y)
Last Name / S		iatory,	Lven	ı ına	K	T	T	N	uiu	,,,,,		atric	1 3	lian		iliy,		Ŧ	T		T	T	T	1	T	1			7
First Name					M	+	Н	=				1	t	+	+	t	+	1	+		╈	╅	+	+	t		H	1	=
Middle Name					A	R	÷	F	_	_			+	+	+	+	+	+	+	1	+	+	+	+	+		$\vdash$	_	<b>=</b>
Mother's Nar	ne (optior	nal)				11	4					1		_	1		_				1		1	_	1	15			
Last Name / S	Surname					T	I					Ī		T	T		T	Ī	T		T	T	T	Ī	T				
First Name						T	T		$\equiv$			T	T	T	T	T	T	T	Ť		T	Ť	T	T	T		П	T	Ti l
Middle Name					1	t	t		_			t		$\top$	$^{\dagger}$	$\dagger$	+	1	$^{\dagger}$		$^{+}$	†	†	T	+		П	$\dashv$	<b>╡</b> ┃
Select the nar	ne of eithe	er fathe	er or n	nothe	er wh	nich	you	may	like	to b	e p	rinte	d o	n PA	N c	ard	(selec	t one	only)		1		_	_	_		ш		
(In case no op																				Г	М	othe	r's N	lam	e (P	lease	tick a:	s appli	cable)
													-	Day			Vloni			_	Yea								5000004.40
Formation of B	3 Date of Birth/Incorporation/Agreement/Partnership/Trust Deed/ Formation of Body of individuals or Association of Persons  1 0 6 1 9 8 0																												
4 Gender (for 'In	dividual' a	applica	ant or	nly)	V	Ma	ale	$\neg$	Fe	male	е		Tra	anse	gen	der	(Pleas	e tick	as ap	olicab	le)	V	5	Ph	oto	Misr	matc	h	
C Signatura Miam	atab	V	7 Ad	ldres	s fo	r Co	omm	unic	atic	n				Г	7	Res	ider	nce		Off	fice	11.		(Plea	se tick	asan	plicabl	el	
6 Signature Mism		Ė	-								7		- 17						_	]		T		(1.00		- J	T		
Name of Office (to be	filled only in cas	se of office	address	+	L		Щ	4	4	4		_	_	Ш											ᆜ	_	4	_	
Flat/Room/ Door / E	3lock No.			S	Н	0	Р		N	0		2		М		Т	Н	Α	Р	U	R				Ш		_	_	
Name of Premises/	Building/\	Village		R	0	Α	D		<b>O</b>	Р	Р		Р	U	N	J	Α	В		Р	L	Α	С	Е					
Road/Street/ Lane/	Post Office	е																							Ш	Ш			
Area / Locality / Tal	uka / Sub-	- Divisio	on								- 1						73 - 3 23 - 3												
Town / City / District	t			J	A	L	Α	N [	<u>)</u>	<u>H ],</u>	A	R																	
State / Union Territory Pincode / Zip code Country Name											_																		
PUNJAB								1	4	4	0	2	2	Ш	INI	OIA													
8 If you desire to	update yo	our oth	ier ad	dres	s al	so,	give	requ	irec	l de	tails	s In	add	itior	nal s	shee	et.												
9 Telephone Num	ber & Em	ail ID c	details	s	Cou	ntry	code	1	Area	a/ST	D/C	Code	9			,	Tele	eph	one	/ Me	lido	e nu	mb	er		_			_,
					9	1											9	8	7	6	2	0	6	9	8	3			
		E	Email	ID	NE	W	DES	TIN	IΑΊ	lO	NT	OU	RT	RA	VE	L@	)GN	ΙΑΙ	L.C	OM	1								
10 AADHAAR nui	mber (if al	llotted	)		5	6	6	4	5	8	1	5	8	3	9	2	5	1											
Name as per AADHAAR letter/card  M O H M A D F A R I D K H A N										2	¬																		
					IVI	U	П	IVI	A	υ			A	K	H	טן	+	K	<u>                                    </u>	A	IN	+	_	1	+	H	H		<b>⊣</b>
						<u> </u>	_	$ \bot $		_			_			_	_		1	L	_			<u>_</u>	$\vdash$	$\vdash$	Щ		<b>⊣</b>
Springer Barrier Dates Committee	<u></u>	W B		v cur-																								- 5	
11 Mention other	Permanen	nt Acco	1		ers	(PA	Ns) i	nad	vert	entl	y a	1	г	o yo	u		-				70			-		_			_
PAN 1		3. 0	PAN	12							L	PAN	13					g			P	AN 4							Ш

12 Verification						
I/We MOHMAD FARID KHAN , 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.  I/We have enclosed 2 (number of documents) in support of proposed changes/corrections.						
	support of proposed changes/corrections.					
Place LUDHIANA						
D D M M Y Y Y						
Date 0 5 0 9 2 0 2 3	Signature / Left Thumb Impression of Applicant (inside the box)					