



Application Number:

Payment Reference:

Payment Date:

User ID:  Amount:  Application Date:



User Name:  Application Source:

PAN Card Mode:  Application Mode:

### Request For New PAN Card Or/ And Changes Or Correction in PAN Data

Only 'Individuals' to affix recent photograph (3.5 cm x 2.5 cm)

Only 'Individuals' to affix recent photograph (3.5 cm x 2.5 cm)

#### Permanent Account Number (PAN)

|                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
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Please read Instructions 'h' & 'i' for selecting boxes on left margin of this form.

Signature/Left thumb impression across this photo

Signature/Left thumb impression

**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 applicable  Shri  Smt  Kumari  M/s

Last Name / Surname

First Name

Middle Name

Name you would like it printed on the PAN card

**2 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

First Name

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)

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

Day   Month   Year

**4 Gender (for 'Individual' applicant only)**  Male  Female  Transgender (Please tick as applicable)  **5 Photo Mismatch**

**6 Signature Mismatch**  **7 Address for Communication**  Residence  Office (Please tick as applicable)

Name of Office (to be filled only in case of office 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 / Zip code  Country Name

**8 If you desire to update your other address also, give required details in additional sheet.**

**9 Telephone Number & Email ID details** Country code  Area/STD/Code  Telephone / Mobile number

Email ID

**10 AADHAAR number (if allotted)**

Name as per AADHAAR letter/card

**11 Mention other Permanent Account Numbers (PANs) inadvertently allotted to you**

PAN 1  PAN 2  PAN 3  PAN 4

12 Verification

I/We , the applicant, in the capacity of

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

I/We have enclosed  (number of documents) in support of proposed changes/corrections.

Place

D D M M Y Y Y Y

Date

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