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Request For New PAN Card Or/ And Changes Or Correction in PAN Data																																
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Permanent Account Number (PAN)															***************************************																	
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)																																
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2 Details of Parents (applicable only for individual applicants), Father's Name : (Mandatory, Even married women should fill in father's name only)										100																						
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Mother's Name (optional) Last Name / Surname								1	Т	Т		Т	Т	Т				Т		Т	Т	Т		Т	T	Т	Т	Т				
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(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)									licable)																							
3 Date of Birth/Incorporation/Agreement/Par Formation of Body of individuals or Associ																	DE Phate Missort															
4 Gender (for 'Individual' applicant only)																		7		_	5	Ph	hoto Mismatch									
6 Signature Mismatch 7 Add						ldres	ss f	for C	omi	mmunication									Residence Of				Off	rice (P				lease tick as applicable)				
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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																																
9 Telephone Nu	nber &	CI	nan i	D de	tanı	5				٦				T							Ť		Т									
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11 Mention other	Perma	ane	nt A			_	ber	s (P	ANs) in	adve	rte	ntly				yo	u						77.			1					_
PAN 1					PAN	N 2	-15			-					PAN :	3								P	AN 4							

12 Verification , the applican	t, in the capacity of
do hereby declare that what is stated above is true to the best of my	
I/We have enclosed (number of documents) in support of p	
Place	
D D M M Y Y Y Y	
Date	Signature / Left Thumb Impression of Applicant (inside the box)
	digitatare / Left Thamb impression of Applicant (inside the box)