


## (अनपढ़ व्यक्ति का पैन कार्ड फार्म कैसे भरे )

1. कृप्या जो अनपढ़ व्यक्ति अंगूठा लगाते है। आपको पैन कार्ड फार्म नौटरी वकील, सरकारी स्कूल, सरकारी अस्पताल या फिर किसी अन्य विभाग के अधिकारी से अटैस्ट कराना होगा। मोहर आपको कहाँ कहाँ लगवानी है इसके नीचे दिये गये फार्म को ध्यानपूर्वक देखें व समझो।
2. आपको यह पैन कार्ड फार्म Black Pen से ही भरना होगा और Signature भी Black Pen से ही कराना होगा।
3. अधूरा भरा पैन कार्ड फार्म मान्य नहीं होगा। फॉर्म को साफ-साफ ही भरना होगा, फॉर्म भरने में जल्दबाजी बिल्कुल ना करे ।
4. पैन कार्ड फार्म के सभी पेजो का आपको एक Single PDF बनाना होगा। जिसका File Size 500 से 990KB के बीच होना चाहिये। इसके लिये आप ट्रेनिंग विडियो आवश्य देखे (PDF फाइल कैसे बनाये व कैसे अपलोड करे)
5. दोनों ही फोटो आपको अच्छी Quality के ही लेने होंगे बेकार Quality का फोटो बिल्कुल भी मान्य नहीं होगा।
6. PDF File बनाते समय ध्यान रखें कलर PDF मान्य नहीं होगा कृप्या Grayscale PDF या फिर Black and White PDF बनाए

**नीचे दिया गया फार्म ध्यानपूर्वक देखें व समझो।**



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

Tax invoice cum Acknowledgement	N - 355709700346486			Date- 28 Dec 2019
Category	INDIVIDUAL	GSTIN of Applicant	NA	
Applicant's Name	RAM PYARI			
Name on Card	RAM PYARI			
Father's Name	NARAYAN			
Mother's Name	Not mentioned			
Date of Birth/	01 Jan 1995	Communication Address State	UTTAR PRADESH (9)	
Telephone/ Mobile	91-7500043808	E-mail ID	PRAVINCSC111@GMAIL.COM	
Proof of Identity	AADHAAR Card issued by the Unique Identification Authority of India			
Proof of Address	AADHAAR Card issued by the Unique Identification Authority of India			
Proof of DOB	AADHAAR Card issued by the Unique Identification Authority of India			
On behalf of NSDL e-Governance Infrastructure Limited (PAN-Centre Managed by NSDL)		PAN application fee	₹91.00	
Branch ID: 35570 Steel City Securities Limited		SGST 9%	₹0.00	
SUVIDHA KENDRA, SHOP NO-5, GROUND F MANDI ROAD, NEAR PRATHAMA BANK DHAWARSI HASANPUR UTTAR PRADESH 244242		CGST 9%	₹0.00	
		IGST 18%	₹16.38	
		Total(Rounded Off)	<b>₹107.00</b>	
GSTIN:27AAACN2082N1Z8		CIN: U72900MH1995PLC095642	SAC : 998319	
This is a computer generated receipt and does not require signature.				Online PAAM 1.2



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Form No. 49A

SANJAY KUMAR

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Application for Allotment of Permanent Account Number

(In the case of Indian Citizens/Indian Companies/Entities incorporated in India)

Advocate (Notary Public) Unincorporated entities formed in India

See Rule 114 Hasarnpur (I.P. Nagar) U.P. Hasarnpur (I.P. Nagar) U.P.

Assessing officer (AO code) Reg. No. 65 (20) 09

Reg. No. 65 (20) 09

Area code	AO type	Range code	AO No.
L K N W		7 1	5

Sign / Left Thumb impression across this photo



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

PYARI

First Name

RAM

Middle Name

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

RAM PYARI

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 01 01 1995

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

MARAYAN

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)

7 Address

Residence 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

UTTAR PRADESH 244255 INDIA

Sample PDF of PANSUVIDHA.COM

**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

91

7500043808

Email ID

pravinesc111@gmail.com

**10 Status of applicant**

Please select status,  as applicable

Individual

Hindu undivided family

Company

Partnership Firm

Government

Association of Persons

Trusts

Body of Individuals

Local Authority

Artificial Juridical Persons

Limited Liability Partnership

**11 Registration Number (for company, firms, LLPs etc.)**

**12 In case of a person, who is required to quote Aadhar number or the Enrolment ID of Aadhar application form as per section 139 AA**

Please mention your AADHAAR number (if allotted) 234911078876

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

RAM PYARI

**13 Source of income**

Please select,  as applicable

Salary

Income from Business / Profession

Business/Profession code

[For Code: Refer instructions]

Income from House property

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

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 AADHAR as proof of identity, AADHAR

as proof of address and AADHAR 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 RAM PYARI the applicant, in the capacity of

HER SELF

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

Place: ADAMPUR

Date: DDMMYY

28122019

SANJAY KUMAR  
Advocate (Notary Public),  
Hasanpur (J.P. Nagar) U.P.  
Reg. No.65 (20) 09

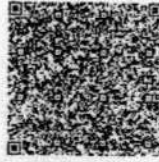
Signature / Left Thumb Impression of Applicant (inside the box)



भारत सरकार  
Government of India



राम प्यारी  
Ram Pyari  
जन्म तिथि / DOB: 01/01/1995  
लिंग / Gender: महिला / Female



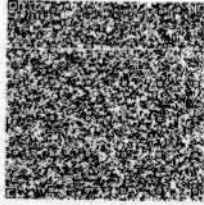
2349 1107 8876

मेरा आधार, मेरी पहचान



भारत सरकार  
Unique Identification Authority of India

पता: C/O कुंवरपाल, ग्राम आदम्पुर, आदम्पुर, राहा, रेहा,  
अमरोहा, उत्तर प्रदेश, 244255



Address: C/O Kunwarpal, gram adampur,  
adampur, Rahra, Rehra, Amroha, Uttar Pradesh,  
244255

2349 1107 8876



1947



help@uidai.gov.in



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**SANJAY KUMAR**

Advocate (Notary Public,  
Hasanpur (J.P. Nagar) U.P.  
Reg. No.65 (20) 00