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लड़की का पैन कार्ड फार्म कैसे भरे ?

1. आपको यह पैन कार्ड फार्म Black Pen से ही भरना होगा और Signature भी Black Pen से ही कराना होगा ।

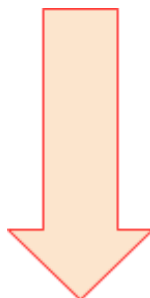
2. अधूरा भरा पैन कार्ड फार्म मान्य नहीं होगा। फॉर्म को साफ-साफ ही भरना होगा, फॉर्म भरने में जल्दबाजी बिल्कुल ना करे ।

3. पैन कार्ड फार्म के सभी पेजों का आपको एक Single PDF बनाना होगा। जिसका File Size 500 KB से 990 KB के बीच होना चाहिये। इसके लिये आप ट्रेनिंग विडियो आवश्यक देखें (PDF फाइल कैसे बनाये व कैसे अपलोड करें)।

4. दोनों ही फोटो आपको अच्छी Quality के ही लेने होंगे बेकार Quality का फोटो बिल्कुल भी मान्य नहीं होगा।

कृपया नीचे दिया गये फार्म ध्यानपूर्वक देखें व समझें।

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

Tax Invoice cum Acknowledgement Number	P - 970221000000151		Date- 29 Sep 2024
Category	INDIVIDUAL	GSTIN of Applicant	NA
Applicant's Name	AADESH		
Name on Card	AADESH		
Father's Name	MAHIPAL SINGH		
Mother's Name	Not mentioned		
Date of Birth/ Incorporation	06 Apr 2000	Communication Address State	UTTAR PRADESH (9)
Telephone/ Mobile Number	91-6395663665	E-mail ID	ASINGH91796@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 Protean eGov Technologies Limited (formerly NSDL e-Governance Infrastructure Limited) PAN Centre Managed by Protean.		PAN application fee	₹91.00
Branch ID: 9702210 Steel City Securities Limited		SGST 9%	₹0.00
PAVAN JAN SEVA KENDRA CHAKOONI WARD NO 42, ADAMPUR ROAD NEAR SHIV TEMPLE, HASANPUR UTTAR PRADESH 244242		CGST 9%	₹0.00
		IGST 18%	₹16.38
		Total(Rounded Off)	₹107.00
GSTIN:27AAACN2082N1Z8	CIN: U72900MH1995PLC095642	SAC : 998319	
This is a computer generated receipt and does not require signature.			Online PAAM 1.2

प्रिय VLE,
आपको PDF बनाते समय
यही क्रम Follow करना है।

1.Acknowledgement receipt

2.Form Front Side

3.Form Back Side

4.AADHAR Card

[In the

प्रत्येक जिले का Area Code अलग- अलग होता है आप अपने जिले का ही Area Code भरे (website पर list दी गयी है।)

ed in India/

To av

to the form

Assessing

Area code		AD type		Range code		AO No.	
L	K	L	W	7	1	0	1

आदेश

Sir,

I/We hereby request that a permanent account number be allotted to me/us.

I/We give below necessary particulars:

Signature / Left Thumb Impression

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

AADESH

First Name

Middle Name

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

AADESH

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	Month	Year
06	04	2000

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

SINGH

First Name

MAHIPAL

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.

D10 MAHIPAL SINGH

Name of Premises / Building / Village

CHAKOONI

Road / Street / Lane/Post Office

UJHARI

Area / Locality / Taluka/ Sub- Division

HASANPUR

Town / City / District

AMROHA

State / Union Territory

UTTAR PRADESH

Pincode / Zip code

244242

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

Area/STD Code

Telephone / Mobile number

+91

6395663665

Email ID

ASINGH91796@GMAIL.COM

10 Status of applicant

Please select status, as applicable

Individual

Hindu undivided family

Company

Partnership Firm

Trusts

Body of Individuals

Local Authority

Artificial Juridical Persons

Government

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) 901956299265

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

A A D E S H

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 CARD as proof of identity, AADHAR CARD

as proof of address and AADHAR CARD 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 AADESH, the applicant, in the capacity of HER SELF

Place : AMROHA

Date : 29 09 20 24

आदेश

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

भारत सरकार
Government of India

आदेश
Aadesh
जन्म तिथि / DOB : 06/04/2000
महिला / Female

9019 5629 9265

मेरा आधार, मेरी पहचान

भारतीय पहचान प्रणाली प्राधिकरण
Unique Identification Authority of India

पता:
आत्मजा, महीपाल सिंह, ग्राम चौकुली,
उझरी, अमरोहा, उझरी, उत्तर प्रदेश,
244242

Address:
D/O: Mahipal Singh, Gram
chakooni, Ujhari, Amroha, Ujhari,
Uttar Pradesh, 244242

9019 5629 9265

1947 help@uidai.gov.in www.uidai.gov.in

पं Y O J A N A

आदेश