

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

Signature/Left thumb impression across this
photo

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

Permanent Account Number (PAN)

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Please read Instructions 'h' & 'i' for selecting boxes on left margin of this form.

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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

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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)

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
<input type="text"/>	<input type="text"/>	<input type="text"/>

4 Gender (for 'Individual' applicant only)

Male Female

(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
<input type="text"/>	<input type="text"/>	<input type="text"/>

Email ID

<input type="text"/>

10 AADHAAR number (if allotted)

<input type="text"/>

Name as per AADHAAR letter/card

<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"/>	<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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11 Mention other Permanent Account Numbers (PANs) inadvertently allotted to you

PAN 1	<input type="text"/>	PAN 3	<input type="text"/>
PAN 2	<input type="text"/>	PAN 4	<input type="text"/>

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

Date

D	D	M	M	Y	Y	Y	Y
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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