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

Sign/ Left Thumb impression across this photo

FORM No. 49AA

APPLICATION FOR ALLOTMENT OF PERMANENT ACCOUNT NUMBER

[INDIVIDUALS NOT BEING A CITIZEN OF INDIA/ENTITIES INCORPORATED OUTSIDE INDIA/ UNINCORPORATED ENTITIES FORMED OUTSIDE INDIA]

See Rule 114

To avoid mistake (s), please follow the accompanying instructions and examples before filling up theForm

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

Signature/Left Thumb Impression

Assessing officer (AO code)

Area code	AO type	Range code	AO No.

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/address documents: initials are not permitted)

Please select title, as applicable ☐ Shri/Mr ☐ Smt/Mrs ☐ Kumari/Ms ☐ M/s

Last Name / Surname

First Name

Middle Name

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

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/Mr ☐ Smt/Mrs ☐ Kumari/Ms ☐ 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**

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

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

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

Email ID

10 Status of applicant

Please select status, ☑ ***as applicable***

☐ **Individual** ☐ **Hindu undivided family** ☐ **Company** ☐ **Partnership Firm** ☐ **Government**

☐ **Trusts** ☐ **Body of Individuals** ☐ **Local Authority** ☐ **Artificial Juridical Persons** ☐ **Association of Persons** ☐ **Limited Liability Partnership**

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

12. Country of Citizenship **ISD Code of the Country of Citizenship**

13 Source of Income ***Please select status,*** ☑ ***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 or Agent of the Applicant in India

Full name, address of the Representative or Agent

Full Name **(Full expanded name: initials are not permitted)**

Please select title, ☑ ***as applicable*** ☐ **Shri/Mr** ☐ **Smt/Mrs** ☐ **Kumari/Ms** ☐ **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 / Zip code

15 Documents submitted as Proof of Identity(POI) and Proof of Address (POA)

I/We have enclosed _____ as proof of identity, _____ as proof of address, and _____ as mandatory certified documents

[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]

16 KYC details* [To be filled in by Foreign Institutional Investor or a Qualified Foreign Investor, as prescribed under the regulations issued by the Securities and Exchange Board of India (SEBI)

*[**"Control"** as defined under SEBI (Substantial Acquisition of Shares and Takeovers) Regulations,1997*

*" **Beneficial owner"** as defined in the para 5.1 of SEBI circular dated December 31, 2010 on Anti Money Laundering.]*

(a) In case of Individuals ***Please select*** ☑ ***as applicable***

Marital Status ☐ Single ☐ Married ☐ Divorced ☐ Widow/Widower

Citizenship Status ☐ I Foreigner ☐ P Person of Indian origin ☐ O Overseas citizen of India

In case of Foreigner, country of Citizenship

Occupation details ☐ Private sector service ☐ Public sector/Govt. service ☐ Business ☐ Professional

☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Others

(b) In case of non individuals *Please select* ☑ *as applicable*

☐ R Private Company ☐ U Public Company ☐ D Body Corporate

☐ S Financial Institution ☐ N Non Government Organization ☐ C Charitable Organization

(c) Gross Annual Income - INR

Networth (Assets less liabilities) in INR

(d) In case of a Public Company, whether listed on a stock exchange ☐ Yes ☐ No *Please select* ☑ *as applicable*

If yes, then indicate name of the stock exchange

(e) In case of Non-individuals

Does it have few persons or persons of the same family holding beneficial ownership and control

☐ Yes ☐ No *Please select* ☑ *as applicable*

[**"Control"** :Control shall include the right to appoint majority of the directors or to control the management or policy decisons exercisable by a person or persons acting individually or in concert, directly or indirectly, including by virtue of their shareholding or management rigths or shareholders agreements or voting agreements or in any other manner

"Beneficial owner" means the natural person who ultimately owns or controls the applicant and/or the person on whose behalf a transaction is being conducted, and includes a person who exercises ultimate effective control over a juridical person]

(f) Is the entity involved / providing any of the following services *Please select* ☑ *as applicable*

Foreign exchange, Money Changer Services	☐ Yes	☐ No
Gaming/Gambling/Lottery services (Casinos and Betting Syndicates)	☐ Yes	☐ No
Money Lending, Pawning	☐ Yes	☐ No

(g) Whether the applicant or the applicant's authorised signatories/trustees/office bearers is

(i) a politically exposed person	☐ Yes	☐ No
(ii) related to a politically exposed person	☐ Yes	☐ No

[For definition of politically exposed person refer to guidelines issued under the Prevention of Money Laundering Act (PMLA)]

(h) Taxpayer identification Number in the country of residence

17 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.

Place

Date D D M M Y Y Y Y

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