



Town / City / District

State / Union Territory  Pin code/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  Government

- |                                     |   |  |   |   |
|-------------------------------------|---|--|---|---|
| <input type="checkbox"/> Individual | <input type="checkbox"/> Hindu undivided family | <input type="checkbox"/> Company         | <input type="checkbox"/> Partnership Firm             | <input type="checkbox"/> Association of Persons       |
| <input type="checkbox"/> Trusts     | <input type="checkbox"/> Body of Individuals    | <input type="checkbox"/> Local Authority | <input type="checkbox"/> Artificial Juridical Persons | <input type="checkbox"/> United Liability Partnership |

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

12. In case of a citizen of India, then  
Please mention your AADHAAR number (if allotted)

13. Source of Income  Salary  Capital Gains  
 Income from Business/ Profession  Business/Profession code  (For Code:Refer Instructions)  Income from other sources  
 Income from House property  No income

14. Representative Assessee (RA)  
Full name, address of the Representative Assessee, who is assessible 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.

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15. Documents submitted as Proof of Identity (POI), Proof of Address (POA) and Proof of Date of Birth

I/We have enclosed  as proof of identity,

as proof of address and  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 , 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   
D D M M Y Y Y Y

Date

Signature/Left Thumb impression of  
Applicant (Inside the box)

**Annexure -A**

*(Certificate to be used by a Member of Parliament/Member of Legislative Assembly/Municipal Councillor or  
Gazetted Officer under sub-rule (4) of rule 114 of the Income-tax Rules, 1962)*

*(Affix same  
photograph as affixed  
on PAN application  
form*

*(To be attested by issuing authority with  
his/her signature & rubber stamp  
appearing half on the photograph and  
half on the certificate)*

I hereby certify that I know Sh./Smt/Kum..... son/daughter of .....and his/her personal particulars as given below are correct to the best of my knowledge and belief. I recommend issue of PAN card by the Income-tax Department to him/her.

Name	
Father's Name (even in case of married ladies father's name is to be provided)	
Date of Birth	
Residence Address (if applicant has resided at more than one place during last one year then all such address with dates should be mentioned)	
Office Address	
Previous Name (in case of change in name)	

**Details of issuer of certificate**

Office address with location

(Signature)

.....

Full Name: .....

Office Seal

Designation: .....

Department/Organisation/Constituency: .....

Identity card No: .....

Date : .....

**(Enclose a photocopy of I-card)**

Place: .....

Telephone: .....

Mobile: .....

**Annexure -B**

*(Affix same  
photograph as  
affixed on PAN  
application form)*

**(Certificate to be used by the employer on the letter head of the organisation/  
institution under sub-rule (4) of rule 114 of the Income-tax Rules, 1962)**

*(To be attested by issuing authority with  
his/her signature & rubber stamp  
appearing half on the photograph and  
half on the certificate)*

It is hereby certified that Sh./Smt/Kum..... son/daughter of ..... is employed with us since ..... He/She is presently working at the following address of the organisation:-

Office Address .....

The residential address of the applicant as verified by us is given below:

Residential Address .....

Registration Number of the Company/Institution etc.....

PAN of the Company/Institution:

**Details of the Individual issuing the certificate**

Full Name: \_\_\_\_\_  
Designation: \_\_\_\_\_  
PAN of the Individual: \_\_\_\_\_  
Office address with location: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Mobile: \_\_\_\_\_  
Date: \_\_\_\_\_  
Place: \_\_\_\_\_

(Signature)  
Office Seal

**Annexure -C**

*(Certificate of identification by Bank on the letter head of the bank under sub-rule (4) of rule 114 of the Income-tax Rules, 1962)*

*(Affix same  
photograph as affixed  
on PAN application  
form)*

*(To be attested by issuing authority with  
his/her signature & rubber stamp  
appearing half on the photograph and half  
on the certificate)*

This is to certify that Sh./Smt/Kum..... son/daughter of..... whose photograph is attested above is holding an account having account number..... with this branch of the bank.

**Details of the Individual issuing the certificate**

Full Name: \_\_\_\_\_  
Designation: \_\_\_\_\_  
PAN of the Individual: \_\_\_\_\_  
Office address with location: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Mobile: \_\_\_\_\_  
Date: \_\_\_\_\_  
Place: \_\_\_\_\_

(Signature)  
Office Seal