

**FORM NO. 49A**

**Application for allotment of Permanent Account Number**

**[In the case of Indian Citizens/Indian Companies/Entities incorporated in India/ Unincorporated entities formed in India]**

**Under section 139A of the Income-tax Act, 1961**

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

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

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to affix  
recent  
photograph  
(3.5 cm X 2.5  
cm)

Assessing Officer (AO Code)

Signature/Left  
Thumb  
Impression  
across the  
photo

Area Code			AO Type		Range Code			AO No.			

Signature/  
Left Thumb  
Impression

Sir,

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

I/We give below the 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

Smt

Kumari

M/s

Last Name/Surname

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

First Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Middle Name

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

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3. Have you ever been known by any other name? (Please Tick as applicable) Yes  No

If yes, please give other name

Please select title,  as applicable Shri  Smt.  Kumari  M/s

Last Name/Surname 

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First Name 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Middle Name 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

4. Gender (For Individual Applicants only) (Please Tick as applicable) Male  Female

5. Date of Birth/Incorporation/Agreement/Partnership or Trust Deed/Formation of Body of Individual or/Association of person 

		-			-				
Day			Month			Year			

6. Father’s Name (Only ‘Individual’ applicants : Even married women should fill in father’s name only)

Last Name/Surname 

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First Name 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Middle Name 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--





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**12. In case of a citizen of India, then** |

Please mention your AADHAAR number (if allotted) 

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**13. Source of income (Please select status, ☐ as applicable)**

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 assessable under the Income-tax Act in respect of the person, whose particulars have been given in column 1 - 13.

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

Please select title as applicable	Shri		Smt.		Kumar		M/s	
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Last Name/Surname 

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First Name 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Middle Name 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Address  
 Flat/Room/Door/Block No.

