

FORM NO. 49A

FORM OF APPLICATION FOR ALLOTMENT OR PERMANENT ACCOUNT NUMBER
(Under Section 139A of the Income-Tax Act, 1961.)

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

To

The Assessing Officer

Sir,

Whereas my/our total income/ the total income of _____
In respect of which I/We am/are assessable under the income-tax act, 1961, during the accounting year ending on
DD MM YYYY
exceeded rupees _____ the minimum amount which is not chargeable to income-tax:

Whereas my/our case doesn't fill under sub-section (1) of section 139 and I am/we are carrying on business the total
sales/turnover/gross receipts of which are or is likely to exceed fifty thousand rupees in the accounting year ending on
DD MM YYYY
exceeded rupees _____ the minimum amount which is not chargeable to income-tax:

Whereas my/our case does not fill under sub-section 139A, and I my/we required to furnish a return of income under sub-
section (1A) of section 139 for the accounting year ending on
DD MM YYYY

And whereas no Permanent Account Number has been allotted to me/us.

* Though earlier PAN had been allotted to across, no permanent account number under new series has been allotted;
* I/we hereby request that a permanent account number/permanent account number under new series be allotted to
me/us;
* Applicable in places notified by the Board under Subsection(4) of Section 139A of the Income Tax Act, 1961.
I/we give below the necessary particulars:-

Please fill as applicable (Shri / Smt./ Kumari / M/s)

1. Full Name (no initials please)

Last Name/Surname _____

First Name _____

Middle Name _____

2. Have you ever been known by any (Yes/No)
other name?

If yes, please give other name (no initials please)

Please fill as applicable (Shri / Smt./ Kumari / M/s)

Last Name/Surname _____

First Name _____

Middle Name _____

3. Address

A. Residential Address

Flat/Door/Block No. _____

Name of Premises/Building/Village _____

Road/Street/Lane/Post Office _____
Area/Locality/Teluka/Sub-Division _____
Town/City/District _____
State/Union Territory _____
Pin _____

B. Office Address

Flat/Door/Block No. _____
Name of Premises/Building/Village _____
Road/Street/Lane/Post Office _____
Area/Locality/Teluka/Sub-Division _____
Town/City/District _____
State/Union Territory _____
Pin _____

4. Email Address _____

5. Status of the Applicant (Individual/Hindu Undivided Family/Company/Firm/Association Of Person/Association Of Persons(Trust)/Body Of Individuals/Local AuthorityArtificial Judicial Person)

6. If any individual, please give Father's Name (no initials please)

Last Name/Surname _____

First Name _____

Middle Name _____

7. Sex (For Individual Applicant (Male/Female) only)

8. Date of (Birth /Incorporation/Agreement/Partnership or Trust Deeds/Formation Of Body Of Individuals/Association Of Persons)

9. Whether citizen of India? (Yes/No)

10. Registration Number (In case of Firms, Companies etc.) _____

11. Source(s) of Income (Saleries / House Property / Business Or Profession /Capital Gains / Income From Other Source(s))

12. Particulars of Business, if any

HEAD OFFICE

Name of Office _____

Flat/Door/Block No. _____

Name of Premises/Building/Village _____

Road/Street/Lane/Post Office _____

Area/Locality/Taluka/Sub-Division _____

Town/City/District _____

State/Union Territory _____

Pin _____

• Nature of Business _____

• Tax Deduction Amount No. if any _____

• Date of commencement DD MM YYYY

• No. of Branches _____

BRANCHES (If required, please add in the given boxes below)

Name of Branch (No.1) _____

Flat/Door/Block No. _____

Name of Premises/Building/Village _____

Road/Street/Lane/Post Office _____

Area/Locality/Taluka/Sub-Division _____

Town/City/District _____

State/Union Territory _____

Pin _____

- Nature of Business _____
- Tax Deduction Account No, if any _____
- Date of commencement : DD MM YYYY

Name of Branch (No.2) _____

Flat/Door/Block No. _____
 Name of Premises/Building/Village _____
 Road/Street/Lane/Post Office _____
 Area/Locality/Taluka/Sub-Division _____
 Town/City/District _____
 State/Union Territory _____
 Pin _____

- Nature of Business _____
- Tax Deduction Account No, if any _____
- Date of commencement DD MM YYYY

13. If Firm/Hindu Undivided Family/Association of Persons/Body of Individuals/Company, the names, Addresses etc. of Partners/Members/Directors/ (For information about more persons, please add separate sheet(s) in the format given below)
 DETAILS OF PARTNERS/MEMBERS/DIRECTORS

a) Number of **(Partners/Members/Directors)**
 No.
 Please fill as applicable **(Shri / Smt. / Kumari / M/S)**

b) Full Name of the first member/partner etc. (no initials please)
 Last Name/Surname _____
 First Name _____
 Middle Name _____

c) Address
 Flat /Door/Block No. _____
 Name of Premises/Building/Village _____
 Road/Street/Lane/Post Office _____
 Area/Locality/Taluka/SubDivision _____
 Town/City/District _____
 State/Union Territory _____
 Pin _____

Last Name/Surname _____
 First Name _____
 Middle Name _____

c) Address
 Flat /Door/Block No. _____
 Name of Premises/Building/Village _____
 Road/Street/Lane/Post Office _____
 Area/Locality/Taluka/SubDivision _____
 Town/City/District _____
 State/Union Territory _____
 Pin _____

14. Full Name, address of the representative assessable under the Income Tax Act in respect of the person, whose particulars have been given in column 1 to 13 (Please see Instruction no.14)

Please fill as applicable (Shri / Smt. / Kumari / M/S)

Full Name(no initials please)

Last Name/Surname _____

First Name _____

Middle Name _____

Address _____

Flat/Door/Block No. _____

Name of Premises/Building/Village _____

Road/Street/Lane/Post Office _____

Area/Locality/Taluka/Sub-Division _____

Town/City/District _____

State/Union Territory _____

Pin _____

15.(i) Permanent Account Number, if any allotted earlier*

(ii) GIR No., if any allotted earlier

(iii) Ward/Circle/Range

I/We, _____, the applicant, do hereby declare that what is stated above is true to the best of my/our information and belief.

*Applicable in places notified by the Board under Subsection(4) of Section 139A of the Income Tax Act, 1961.

Verified today, the

DD MM YYYY