| Only Individuals<br>to affix<br>recent photgraph<br>(3.5 cm x 2.5 cm)  |   | Request For New Please read Ins | Only Individuals<br>to affix<br>recent photgraph<br>(3.5 cm x 2.5 cm) |              |                |                       |             |                                     |
|--|---|---------------------------------|---|--------------|----------------|-----------------------|-------------|-------------------------------------|
|  | Sign/left Thumb impression across this photo  |                                 |   |              |                |                       |             | 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) |   |                                 |   |              |                |                       |             |                                     |
|  | •   | _ ··                            | Shri  |              | Smt.           | ☐ Kumari              | ☐ M/s       | S                                   |
|  | Last Name / Surname<br>First Name<br>Middle Name  |                                 |   |              |                |                       |             |                                     |
|  | Name you would like   | e it printed on the PAN         | card  |              |                |                       |             |                                     |
|  |   |                                 |   |              |                |                       |             |                                     |
|  | 2 Father's Name (0  | Only 'Individual' applica       | nts: Even ma  | arried wo    | men should     | fill in father's nam  | ne only)    |                                     |
|  | Last Name / Surname<br>First Name   |                                 |   |              |                |                       |             |                                     |
|  | Middle Name   |                                 |   |              |                |                       |             |                                     |
|  | 3 Date of Birth / Inco  | rporation / Agreement / Part    | nership / Trus  | t / Deed / F | ormation of B  | ody of individuals or | Association | n of Persons                        |
|  | Day Mo  | nth Year                        |   |              |                |                       |             |                                     |
|  | 4 Gender for Indiv  | ridual applicant only           |   | ☐ Ma         | ale            | ☐ Female              | (Pleas      | e tick as applicable)               |
| 5 Photo Mismatch   |   |                                 |   |              |                |                       |             |                                     |
| ☐ 6 Signature Mismatch   |   |                                 |   |              |                |                       |             |                                     |
|  | 7 Address for Cor   | nmunication                     |   | ☐ Re         | esidence       | ☐ Office              | (Pleas      | e tick as applicable)               |
|  | Name of Office (to be fi<br>Flat / Room / Door / Block<br>Name of Premises / Build<br>Road / Street / Lane / Pos<br>Area / Locality / Taluka / S<br>Town / City / District<br>State / UnionTerritory  | ing / Village<br>et Office      |   | Pin code     | e / Zip code   | Cou                   | untryName   |                                     |
|  | 8 If you desire to  | update your other addre         | ess also, give  | e required   | d details in a | dditional sheet.      |             |                                     |
|  | 9 Telephone Numb  | er & Email ID details           |   |              |                |                       |             |                                     |
|  | Country code Email Id   | Area / STD Code                 |   | Telepho      | ne / Mobile r  | number                |             |                                     |
|  | 10 AADHAR numbe   | er (if allotted)                |   |              |                |                       |             |                                     |
|  | 11 Mention other Permanent Account Numbers (PANs) inadvertently allotted to you   |                                 |   |              |                |                       |             |                                     |
|  | PAN 1 PAN 2 PAN 2 PAN 3 PAN 4 |                                 |   |              |                |                       |             |                                     |
|  | 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.  |                                 |   |              |                |                       |             |                                     |
|  | Place   |                                 |   |              |                |                       |             |                                     |
|  | D D M   | M Y Y Y Y                       |   |              |                |                       |             | Thumb Impression of inside the box) |

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