

Request For New PAN Card Or/ And Changes Or Correction in PAN Data

Applicant Signature / Thumb Impression Across This Photo

Applicant Photo Only

4 TH LETTER = PERSONAL / INDIVIDUAL

Permanent Account Number (PAN)

A	B	C	P	E	1	2	3	4	F
---	---	---	---	---	---	---	---	---	---

Male Female Un-Married Women

Applicant Signature / Thumb Impression Only

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

A	B	C	D																
---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 First Name

M	N	O	P	Q															
---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 Middle Name

X	Y	Z																	
---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Name you would like it printed on the PAN card

2 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

A	B	C	D																
---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 First Name

P	Q	R	S	T															
---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 Middle Name

U	V	W	X	Y	Z														
---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Mother's Name (optional)

Last Name / Surname

P	Q	R	S	T	U	V	W	X	Y	Z									
---	---	---	---	---	---	---	---	---	---	---	--	--	--	--	--	--	--	--	--

← Father Name Will display on Pancard
 First Name
 Middle Name

Select the name of either father or mother which you may like to be printed in 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)

3 Date of Birth/Incorporation/Agreement/Partnership/Trust Deed/ Formation of Body of individuals or Association of Persons

Day

0	1
---	---

 Month

0	1
---	---

 Year

0	0	0	1
---	---	---	---

4 Gender (for 'Individual' applicant only) Male Female (Please tick as applicable)

5 Photo Mismatch

6 Signature Mismatch

7 Address for Communication Residence Office (Please tick as applicable)

Name of Office (to be filled only in case of office address)

Flat/Room/ Door / Block No.

D	O	O	R	N	O														
---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Name of Premises/ Building/Village

S	T	R	E	E	T	/	L	A	N	E									
---	---	---	---	---	---	---	---	---	---	---	--	--	--	--	--	--	--	--	--

Road/Street/ Lane/Post Office

C	O	L	O	N	Y														
---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Area / Locality / Taluka / Sub- Division

C	I	T	Y	/	T	O	W	N											
---	---	---	---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--

Town / City / District

D	I	S	T	R	I	C	T												
---	---	---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--

State / Union Territory

S	T	A	T	E	N	A	M	E
---	---	---	---	---	---	---	---	---

 Pincode / Zip code

1	2	3	4	5	6
---	---	---	---	---	---

 Country Name

I	N	D	I	A
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8 If you desire to update your other address also, give required details in additional sheet.

9 Telephone Number & Email ID details

Country code

9	1
---	---

 Area/STD Code

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 Telephone / Mobile number

9	8	1	2	3	4	5	6	7	8
---	---	---	---	---	---	---	---	---	---

Email ID

f	r	a	n	c	h	i	s	e	e	m	a	i	@	x	m	a	i	.	c	o	m
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

10 AADHAAR number (if allotted)

1	2	3	4	5	6	7	8	9	1	2	3
---	---	---	---	---	---	---	---	---	---	---	---

Name as per AADHAAR letter/card

A	B	C	D	M	N	O	P	Q	X	Y	Z									

*** Incase of No Pan Proof (Pancard Xerox / Pan Allotment Letter) then you have to write on Application as " GOOD EFFORT BASIS "**

11 Mention other Permanent Account Numbers (PANs) inadvertently allotted to you

PAN 1

C	A	N	C	E	L
---	---	---	---	---	---

 PAN 2

C	A	N	C	E	L
---	---	---	---	---	---

 PAN 3

S	U	R	R	E	N	D	E	R
---	---	---	---	---	---	---	---	---

 PAN 4

S	U	R	R	E	N	D	E	R
---	---	---	---	---	---	---	---	---

12 Verification

I/We

A	p	p	i	c	a	n	t
---	---	---	---	---	---	---	---

, the applicant, in the capacity of

H	i	m	s	e	l	f
---	---	---	---	---	---	---

 do hereby

declare that what is stated above is true to the best of my/our information and belief.

I/We have enclosed

2

 (number of documents) in support of proposed changes / corrections.

Place

C	i	t	y	/	T	o	w	n	/	D	i	s	t	r	i	c	t
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

Date

0	1	0	1	0	0	0	1
---	---	---	---	---	---	---	---

 ← Ack Receipt Generated date

Applicant Signature / Thumb Impression Only