

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]

See Rule 114

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

Assessing officer (AO code)

Area code	AO type	Range code	AO No.
P N E	0 W	0 2 9	0 3

Sign / Left Thumb impression across this photo

Sir,  
सा.ने.गु.जी. ब.च.त. ग.ट.  
अध्यक्ष  
नि.ल.ग.ज.ल.त.

I/We hereby request that a permanent account number be allotted to me/us.  
I/We give below necessary particulars:



Syamad  
अध्यक्ष  
सा.ने.गु.जी. ब.च.त. ग.ट.  
नि.ल.ग.ज.ल.त.  
Signature / Left Thumb Impression

1 Full Name (Full expanded name to be mentioned as appearing in proof of identity/date of birth/address documents: initials are not permitted)

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

Last Name / Surname: S A N E G U R U G J I B A C H A T G A T  
First Name: \_\_\_\_\_  
Middle Name: \_\_\_\_\_

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

S A N E G U R U G J I B A C H A T G A T

3 Have you ever been known by any other name?  Yes  No (please tick as applicable)

If yes, please give that other name

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

Last Name / Surname: \_\_\_\_\_  
First Name: \_\_\_\_\_  
Middle Name: \_\_\_\_\_

4 Gender (for Individual applicants only)  Male  Female  Transgender (please tick as applicable)

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

Day: 20 Month: 11 Year: 2019

6 Details of Parents (applicable only for individual applicants)

Whether mother is a single parent and you wish to apply for PAN by furnishing the name of your mother only?

Yes  No (please tick as applicable)

If yes, please fill in mother's name in the appropriate space provide below.

Father's Name (Mandatory except where mother is a single parent and PAN is applied by furnishing the name of mother only)

Last Name / Surname: \_\_\_\_\_  
First Name: \_\_\_\_\_  
Middle Name: \_\_\_\_\_

Mother's Name (optional except where mother is a single parent and PAN is applied by furnishing the name of mother only)

Last Name / Surname: \_\_\_\_\_  
First Name: \_\_\_\_\_  
Middle Name: \_\_\_\_\_

Select the name of either father or mother which you may like to be printed on PAN card (Select one only)

Father's name  Mother's name (Please tick as applicable)

(In case no option is provided then PAN card will be issued with father's name except where mother is a single parent and you wish to apply for PAN by furnishing name of the mother only).

7 Address

Residence Address

Flat / Room / Door / Block No. SHILA NIWAS  
Name of Premises / Building / Village KRISHNA NAGAR  
Road / Street / Lane/Post Office UDGIR  
Area / Locality / Taluka/ Sub- Division UDGIR  
Town / City / District LATUR

State / Union Territory

Pincode / Zip code

Country Name

MAHARASHTRA 413517 INDIA



**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

+91

9657135286

Email ID

**10 Status of applicant**

Please select status,  as applicable

Individual

Hindu undivided family

Company

Partnership Firm

Government

Trusts

Body of Individuals

Local Authority

Artificial Juridical Persons

Association of Persons

Limited Liability Partnership

**11 Registration Number (for company, firms, LLPs etc.)**

**12 In case of a person, who is required to quote Aadhaar number or the Enrolment ID of Aadhaar application form as per section 139 AA**

Please mention your AADHAAR number (if allotted)

If AADHAAR number is not allotted, please mention the enrolment ID of Aadhaar application form

Name as per AADHAAR letter or card or as per the Enrolment ID of Aadhaar application form

**13 Source of Income**

Salary

Income from Business / Profession

Business/Profession code

[For Code: Refer instructions]

Income from House property

Please select,  as applicable

Capital Gains

Income from Other sources

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 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.  
Name of Premises / Building / Village  
Road / Street / Lane/Post Office  
Area / Locality / Taluka/ Sub- Division  
Town / City / District  
State / Union Territory

Pincode

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

I/We have enclosed AGREEMENT as proof of identity, AGREEMENT as proof of address and AGREEMENT 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 SANCHAY, the applicant, in the capacity of HIMSELF do hereby declare that what is stated above is true to the best of my/our information and belief.

Place : LATUR

Date : 22012020

Signature / Left Thumb Impression of Applicant (inside space)

Sanchay  
अध्यक्ष

Rakesh  
सचिव

सानेगुरुजी वचत मठ





महाराष्ट्र MAHARASHTRA

2019

VG 109193

मु.वि.नोंदवही अ.क्र. १४६२ दि. २१/११/२०१९ सानेगुरुजी बचत गट निलंगा

दस्ताचा प्रकार. विक्री. २१/११/१९

दस्त नोंदणी करणार आहेत का? होय/नाही

हस्ते आसल्यास त्यांचे नाव, पत्ता व सही. प्र. दे. ग. पा. २१/११/१९

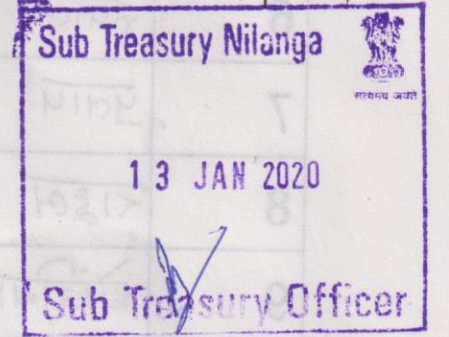
मुद्रांक शुल्क रक्कम. १००.००

परवानाधारक मुद्रांक विक्रेत्याची ए. पी. कार्यालये.

सही व परवाना क्रमांक तसेच सु. विक्रेता. दु. नि. कार्यालय.

मु. विक्रीचे ठिकाण व पत्ता निलंगा. प. क्र. ३७०५००७.

ज्या कारणासाठी मुद्रांक खरेदी केला त्याची त्याच कारणासाठी मुद्रांक खरेदी केल्यापासून (६) महिन्यात वापरणे बंधनकारक आहे.

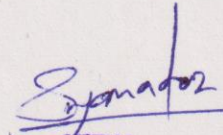
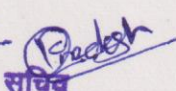


### करारनामा

असे लिहून देती कि, साने गुरुजी बचत गट निलंगा, ता. निलंगा. जि.

लातूर या गटाची स्थापना 15-08-2019 झाली असून गटाचा व्यवसाय

संघटन असून. खालील प्रमाणे बचत गटात सभासद कार्यरत आहे.

  
अध्यक्ष  
  
सचिव  
सानेगुरुजी बचत गट



क्रमांक	सभासदाचे नाव	पद	सही
1	संचय मनोहर जमादार	अध्यक्ष	<u>Syemta</u>
2	महेश सुभाष शिरसागर	सचिव	<u>Onaksh</u>
3	तानाजी उत्तमराव सोमवंशी	सभासद	<u>Danshi</u>
4	नागनाथ बाबूदास सुखसे	सभासद	<u>Neml</u>
5	दिपिका दिलीप कुलकर्णी	सभासद	<u>Dikkarani</u>
6	रुपाली हिरालाल पंतगे	सभासद	<u>R. Pantange</u>
7	प्रताप विश्वनाथ डावाले	सभासद	<u>Blms</u>
8	राहुल रामराव मोरे	सभासद	<u>Bhavanle</u>
9	द्योतीबा सायानोड गोंदवाल	सभासद	<u>SS</u>
10	संघनाथ विठ्ठल मोरे	सभासद	<u>Suethm</u>

समाप्त

शि. मंगळी. ११, मंगळी ५१०५-८०-८१, मंगळी ५१०५-८०-८१, मंगळी ५१०५-८०-८१

मंगळी ५१०५-८०-८१, मंगळी ५१०५-८०-८१, मंगळी ५१०५-८०-८१

मंगळी ५१०५-८०-८१, मंगळी ५१०५-८०-८१, मंगळी ५१०५-८०-८१





भारत सरकार  
Government of India



संचय मनोहर जमादार  
Sanchay Manohar Jamadar  
जन्म तारीख/ DOB: 20/03/1985  
पुरुष / MALE



2053 5855 6923

माझे आधार, माझी ओळख



भारत सरकार  
माझे आधार प्राधिकरण  
Unique Identification Authority of India

पत्ता:  
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