Application Source: EWALLET - B48 - RAR ONLINEPSA COMMUNICATIONS PVT LTD **Application Date:** 14/09/2023

User Id: MOFAZ10876 **User Name:** MOFAZ10876

PAN CARD MODE : Both physical PAN and e-PAN Card **Application Mode :** Physical Application

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 mistakes, please follow the accompanying instructions and examples before filling up the form

Assessing officer (AO code)

Area code			AO type	Range code				AO No.		
W	B	G	W	1	6	6	9	1		

Signature/Left thumb impression across this photo

Signature/Left Thumb Impression

Sir, I/We hereby request that a Permanent Account Number be allotted to me/us.
I/We give below 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: B I B I

First Name: S A B E R I N A

Middle Name:

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

S A B E R I N A   B I B I

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	Month	Year
1 4	0 8	1 9 7 6

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 provided below.

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

Last Name / Surname: I S L A M

First Name: N A J R U L

Middle Name:

Mothers'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)

(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)   ✓ Father's name   ☐ Mother's Name   (Please tick as applicable)

7 Address

Residence Address

Flat / Room / Door / Block No.	B A D U R I A
Name of Premises / Building / Village	J A S H A I K A T I
Road / Street / Lane/Post Office	J A S H A I K A T I
Area / Locality / Taluka/ Sub- Division	B A D U R I A
Town / City / District	N O R T H 2 4 P A R G A N A S

State / Union Territory	Pincode / Zip code	Country Name
W E S T B E N G A L	7 4 3 4 0 1	I N D I A

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																							

8 Address for Communication   ☑ **Residence**   ☐ **Office**   (Please tick as applicable)

9 Telephone Number & Email ID details

Country code	Area/STD Code	Telephone / Mobile number
9 1		9 5 9 3 0 0 4 3 9 8

Email ID [   ]

10 Status of applicant

Please select status, ☑ as applicable   ☐ Government

☑ Individual   ☐ Hindu undivided family   ☐ Company   ☐ Partnership Firm   ☐ Association of Persons

☐ Trusts   ☐ Body of Individuals   ☐ Local Authority   ☐ Artificial Juridical 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/The Enrolment ID of Aadhaar application form as per section 139AA

Please mention your AADHAAR number (if allotted) | 2 | 3 | 1 | 2 | 8 | 8 | 2 | 7 | 5 | 4 | 3 | 4 |

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

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

S	A	B	E	R	I	N	A		B	I	B	I											

13   Source of Income   Please select, ☑ as applicable

☐ Salary   ☐ Income from House property   ☐ No income   ☐ Capital Gains

☐ Income from Business / Profession   Business/Profession code [ ] [For Code: Refer instructions]   ☑ Income from Other sources

14 Representative Assessee (RA)

Full name, address of the Representative Assessee, who is assessible 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 (DOB)

I/We have enclosed [AADHAAR Card issued by UIDAI] as proof of identity, [AADHAAR Card issued by UIDAI]

as proof of address and [AADHAAR Card issued by UIDAI] 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 [SABERINA BIBI], the applicant, in the capacity of [HIMSELF/HERSELF]

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

Place : [BADURIA]

সাবেরিনা বিবি

	D D M M Y Y Y Y
Date :	1 4 0 9 2 0 2 3

Signature / Left Thumb Impression of Applicant (inside the box)

भारत सरकार
Unique Identification Authority of India
Government of India

Enrollment No.: 1111/19231/03813

22/01/2015

234103485

To
SABERINA BIBI
Jashaikati
Jasaikati
Baduria North 24 Parganas
West Bengal 743401

MP341034850FT

आपका आधार क्रमांक / Your Aadhaar No. :

2312 8827 5434

आधार - आम आदमी का अधिकार

भारत सरकार
Government of India

SABERINA BIBI
Father : NAJRUL ISLAM
DOB : 14/08/1976
Female

2312 8827 5434

आधार - आम आदमी का अधिकार

सूचना

- आधार पहचान का प्रमाण है, नागरिकता का नहीं ।
- पहचान का प्रमाण ऑनलाइन प्रमाणीकरण द्वारा प्राप्त करें ।

INFORMATION

- Aadhaar is proof of identity, not of citizenship .
- To establish identity, authenticate online .

- आधार देश भर में मान्य है ।
- आधार भविष्य में सरकारी और गैर-सरकारी सेवाओं का लाभ उठाने में उपयोगी होगा ।
- Aadhaar is valid throughout the country .
- Aadhaar will be helpful in availing Government and Non-Government services in future .

आधार
भारत की विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

Address:
Jashaikati, North 24 Parganas, Jasaikati, West Bengal, 743401

2312 8827 5434

☎ 1947
1800 300 1947

✉ help@uidai.gov.in

www www.uidai.gov.in

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