

LOCAL AUTHORITY/FIRM/TRUST/COMPANY SAMPLE DEMO PANACRD FORM

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.
K A R W		5 2 1	0 4

Sign / Left Thumb impression across this photo

Only
'Individuals'
to affix recent
photograph
(3.5 cm x
2.5 cm)

For, Mahalaxmi Neeru Balakedarar
Sangh, Telasang.

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/date of birth/address documents: initials are not permitted)

Please select title, ☒ as applicable

☐ Shri ☐ Smt. ☐ Kumari ☐ M/s

Last Name / Surname

MAHALAXMI NEERU

First Name

BALAKEDARAR SANGH

Middle Name

TELASANG

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

MAHALAXMI NEERU BALAKEDARAR SANGH
TELASANG

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
07 10 2020

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.

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

Office Address			
Name of office		MAHALAXMI NEERU	
Flat / Room / Door / Block No.		BALAKEDARAR SANGH	
Name of Premises / Building / Village		TELASANG	
Road / Street / Lane/Post Office		TELASANG	
Area / Locality / Taluka/ Sub- Division		ATHANI	
Town / City / District		BELAGAVI	
State / Union Territory		Pincode / Zip code	Country Name
KARNATAKA		591304	INDIA

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		123456789

Email ID: DEMO@GMAIL.COM

10. Status of applicant

Please select status, ☒ as applicable

<input type="checkbox"/> Individual	<input type="checkbox"/> Hindu undivided family	<input type="checkbox"/> Company	<input type="checkbox"/> Partnership Firm	<input type="checkbox"/> Government
<input type="checkbox"/> Trusts	<input type="checkbox"/> Body of Individuals	<input checked="" type="checkbox"/> Local Authority	<input type="checkbox"/> Artificial Juridical Persons	<input type="checkbox"/> Association of Persons
				<input type="checkbox"/> Limited Liability Partnership

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

DABG/SOR/559/2020-2021

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 Please select, ☒ as applicable

<input type="checkbox"/> Salary	<input type="checkbox"/> Capital Gains
<input type="checkbox"/> Income from Business / Profession Business/Profession code [] [] [For Code: Refer instructions]	<input type="checkbox"/> Income from Other sources
<input type="checkbox"/> Income from House property	<input checked="" type="checkbox"/> 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 Registration Copy as proof of identity, Registration Copy as proof of address and Registration Copy as proof of date of birth.

(Please refer to the instructions (as specified in Rule 114 of IT 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 S.S. Kumbhar, the applicant, in the capacity of Sangh do hereby declare that what is stated above is true to the best of my/our information and belief.

Place: Athani

Date: 23/10/2020

For, Mahalaxmi Neeru Balakedarar Sangh, Telasang.

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

ಕರ್ನಾಟಕ ಸರ್ಕಾರ



ಸಹಕಾರ ಇಲಾಖೆ

ಸಹಕಾರ ಸಂಘಗಳ ಉಪನಿಬಂಧಕರು ಹಾಗೂ
ಜಿಲ್ಲಾ ಸಂಘಗಳ ನೋಂದಣಾಧಿಕಾರಿಗಳು
ಬೆಳಗಾವಿ ಜಿಲ್ಲೆ

ನೋಂದಣಿ ಪ್ರಮಾಣ ಪತ್ರ

ದಿನಾಂಕ: 07/10/2020

ನೋಂದಣಿ ಸಂಖ್ಯೆ :DRBG/SOR/559/2020-2021.

ಕರ್ನಾಟಕ ಸಂಘಗಳ ನೋಂದಣಿ ಕಾಯ್ದೆ 1960 (1960 ನೆಯ ಇಸವಿ 17 ನೇ ಕ್ರಮಾಂಕದ ಕರ್ನಾಟಕ
ಅಧಿನಿಯಮ) ಮೇರೆಗೆ ಈ ಕೆಳಕಂಡ ಹೆಸರಿನ

MAHALAXMI NEERU BALAKEDARAR SANGH TELASANG 591265 ATHNI
- 591265, BELGAUM

ಸಂಘವನ್ನು ನೋಂದಾಯಿಸಲಾಗಿದೆ ಎಂದು ಈ ಮೂಲಕ ಪ್ರಮಾಣೀಕರಿಸುತ್ತೇನೆ.

ನೋಂದಣಿ ಶುಲ್ಕ ರೂಪಾಯಿ (ಅಂಕಗಳಲ್ಲಿ) 500.00/-

(ಅಕ್ಷರಗಳಲ್ಲಿ ಐದು ನೂರು ರೂಪಾಯಿಗಳು ಮಾತ್ರ) ಗಳನ್ನು ಪಾವತಿಸಲಾಗಿದೆ.

07/10/2020 ದಿನಾಂಕದಂದು ನನ್ನ ಸಹಿ ಮತ್ತು ಮುದ್ರೆಯೊಂದಿಗೆ ನೀಡಲ್ಪಟ್ಟಿದೆ.

Class of Society :GENERAL

For, Mahalaxmi Neeru Balakedarar
Sangh, Telasang.



ಸಹಕಾರ ಸಂಘಗಳ ಉಪ ನಿಬಂಧಕರು
ಹಾಗೂ ಜಿಲ್ಲಾ ಸಂಘಗಳ ನೋಂದಣಾಧಿಕಾರಿಗಳು
ಬೆಳಗಾವಿ ಜಿಲ್ಲೆ, ಬೆಳಗಾವಿ





ಭಾರತೀಯ ಏಕೀಕೃತ ಗುರುತು ಪ್ರಾಧಿಕಾರ

ಭಾರತ ಸರ್ಕಾರ

Unique Identification Authority of India
Government of India

ನೋಂದಾವಣೆ ಕ್ರಮ ಸಂಖ್ಯೆ / Enrollment No.: 0821/80462/01935

To,
ಸದಾನಂದ ಶಿವಪ್ಪ ಕುಂಬಾರ
Sadanand Shivappa Kumbhar
C/O Shivappa Kumbhar
house no 135
main road
near laxmi temple kumbhar oni Telsang
Telsang Athani Belgaum
Karnataka 591265

Ref: 973 / 31T / 92567 / 92584 / P



SB001870799FH



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

6664 5572 4721

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India

ಸದಾನಂದ ಶಿವಪ್ಪ ಕುಂಬಾರ
Sadanand Shivappa Kumbhar
ಜನ್ಮ ದಿನಾಂಕ / DOB : 01/01/1979
ಪುರುಷ / Male



6664 5572 4721

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

For, Mahalaxmi Neeru Balakedaru
Sangh, Telsang.



Government of India



AADHAAR

ಮಾಹಿತಿ

- ಆಧಾರ್ ಗುರುತಿನ ಪುರಾವೆಯೇ ಹೊರತು ಪೌರತ್ವದಲ್ಲ.
- ನಿಮ್ಮ ಗುರುತನ್ನು ಸಾಬೀತುಪಡಿಸಲು, ಆನ್ ಲೈನ್ ಮೂಲಕ ದೃಢೀಕರಿಸಿ.

INFORMATION

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

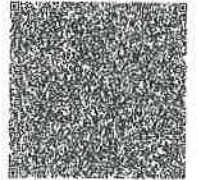
- ಆಧಾರ್ ದೇಶದಾದ್ಯಂತ ಮಾನ್ಯತೆಯನ್ನು ಪಡೆದಿದೆ.
- ಭವಿಷ್ಯದಲ್ಲಿ, ಸರ್ಕಾರಿ ಹಾಗೂ ಸರ್ಕಾರೇತರ ಸೇವೆಗಳನ್ನು ಪಡೆಯಲು ಆಧಾರ್ ನಿಮಗೆ ಸಹಾಯಕವಾಗಲಿದೆ.
- Aadhaar is valid throughout the country.
- Aadhaar will be helpful in availing Government and Non-Government services in future.

31T / 92567



ಭಾರತೀಯ ಏಕೀಕೃತ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ವಿಳಾಸ: C/O ಶಿವಪ್ಪ ಕುಂಬಾರ, ಹೌಸ್ ನ 135, ಮೇನ್ ರೋಡ್, ಲಕ್ಷ್ಮೀ ದೇವಸ್ಥಾನದ ಹತ್ತಿರ, ಕುಂಬಾರ ಓಡೆ, ತೆಲಸಂಗ, ತೆಲಸಂಗ, ಬೆಳಗಾವಿ, ಕರ್ನಾಟಕ, 591265
Address: C/O Shivappa Kumbhar, house no 135, main road, near laxmi temple, kumbhar oni, Telsang, Telsang, Belgaum, Karnataka, 591265



6664 5572 4721



1947



help@uidai.gov.in



www.uidai.gov.in

(S. S. Kumbhar)