Form 49A Application for Allotment of Permanent Account Number [In the case of Indian Citizens/Indian Companies/Entities incorporated in India/

[In the case of Indian Citizens/Indian Companies/Entities incorporated in India/ Unincorporated entities formed in India] Under section 139A of the Income Tax Act, 1961



Area Code



Application Number: G044011851 Coupon Number: G044011851

Range Code

AO No

1. Full Name (Full expande	ed name: initials are not permitte	d):		
Title:- SHRI	Last Name:- KUAMR Middle Name:-		First Name:- ABHISHEK	
2. Abbreviation of the abo KUAMR	ve name, as you would like it, to	be printed on the PAN card:- ABHISHE	K	
3. Have you been known b	by any other name? N	STATE OF THE PROPERTY OF THE PERSON OF THE P		
	Last Name:-	Middle Name:-	First Name:-	
4. Gender:-				
5.Date of Birth / Incorporation/Agreement/Partnership or Trust Deed/Formation of Body of Individuals/Association of Persons:-				
6. Father's Name :	12 TO LIBERT A.			
	Middle Name:- N/A	First Name:- BRAJENDRA		

7. Address:-			
Residential Address:-			
Flat/Door/Block No.:-			SURYA VATIKA KE PASS
Name of Premises/Building/Vill	GANJ MUHAL LAKHANA		
Road/Street/Lane/Post Office:-	LAKHANA		
Area/Locality/Taluka/Sub-Divisi	ion:-		BHARTHANA
Town/City/District:- ETAWAH	State/Union Territory:- UTTAR PRADESH	PIN Code:- 206127	Country:- INDIA
Official Address:-			
Office Name:-			JAN SEWA KENDRA

Assessing Officer(AO Code)

AO Type

11. Registration Number(for Company,firms,LLP's etc):-

Number(if allotted) :-13.Source of Income

12. Please Mention your AADHAAR

Business/Profession code:-

Flat/Door/Block No.:-				BY PASS TIRAHA		
Name of Premises/Building/Village:-					KALIKA MUHAL LAKHANA	
Road/Street/Lane/Post Office:-					LAKHANA	
Area/Locality/Taluka/Sub-Division:-					BHARTHANA	
		State/ PRAD	e/Union Territory:- UTTAR DESH		PIN Code:- 206127	Country:- INDIA
8. Address for Communication:-	IRESIDENCE		F see of See			
9. Telephone Numb	er & Email I	D Detail	s ·-			
				7	Email	1
Code:- 91	Area/STD	Code:-	Telephone/Mobile Number:-	7417176058	Address:-	JANSEWA.AADHAR2@GMAIL.CON
10. Status of the Ar			Individual			

		Representative Assessee, who is assessab we been given in colmns 1 to 13.	le under the Income	Tax Act in respect of the
SHRI		Last Name:- KUMAR	Middle Name:-	First Name:- BRAJENDRA
Flat/Door/Block N	0.:-			SURYA VATIKA KE PASS
Name of Premises	/Building/Vi	llage:-		GANJ MUHAL LAKHANA
Road/Street/Lane/	LAKHANA			
Area/Locality/Talu	ka/Sub-Divi	sion:-		BHARTHANA
Town/City/District	- ETAWAH	State/Union Territory:- UTTAR PRADESH	PIN Code:- 206127	uvčumate ilozi ichika (iti)

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Place	Date	Signature/Left thumb impression of the applicant
ETAWAH	29 -03-2021	विदान्ड कमार
16. I/We ABHISHEK KUAMR ,the applicant,in the capacity of declare that what is stated above is true to the best of my/ou	f HIMSELF/HERSELF do hereby ir information and belief.	& Canteer-
15. I/We have enclosed AADHAAR Card issued by UIDAI (In AADHAAR Card issued by UIDAI (In Copy) as Proof of Add UIDAI (In Copy) as Proof of DOB.		Philade S. Frene year bean kinder





आरतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India

इटावा, लेखना, उत्तर प्रदेश, 206127 Elawah, Lakhana, Ullar Pradesh, 206127

पताः आत्मजः बजेन्द्र कुमार, गज Address: S/O: Brajendra Kumar, ganj मुहाल सूर्य वाटिका के पास. लखना, muhal surya vatika ke pas, Lakhana,

8469 1066 2921



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