

**Form No. 49AA**

**Application for Allotment of Permanent Account Number  
[Individuals not being a Citizen of India/Entities incorporated outside India/  
Unincorporated entities formed outside India]**

See Rule 114

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

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

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affix recent photograph  
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**Assessing officer (AO code)**

Sign / Left Thumb impression  
across this photo

Area code	AO type	Range code	AO No.

Signature / Left Thumb impression
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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/Mr  Smt/Mrs  Kumari/Ms  M/s

Last Name / Surname

First Name

Middle Name

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

**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/Mr  Smt/Mrs  Kumari/Ms  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

**6 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

First Name

Middle Name

**Mother's Name (optional)**

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)

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

**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		
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
Email ID		

**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 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, etc.)**

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12 Country of citizenship  ISD code of country of citizenship

**13 Source of Income** Please select status,  as applicable

<input type="checkbox"/> Salary	<input type="checkbox"/> Capital Gains
<input type="checkbox"/> Income from Business / Profession	<input type="checkbox"/> Income from Other sources
<input type="checkbox"/> Income from House property	<input type="checkbox"/> No income
Business/Profession code <input type="text"/>	[For Code: Refer instructions]

**14 Representative or Agent of the Applicant in India**

Full name, address of the Representative or Agent

Full Name (Full expanded name: initials are not permitted)

Please select title,  as applicable  Shri/Mr  Smt/Mrs  Kumari/Ms  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 / Zip code

**15 Documents submitted as Proof of Identity(POI) and Proof of Address (POA)**

I/We have enclosed  as proof of identity,  as proof of address, and  as mandatory certified documents

[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]

