	[In the pas Semau JJ To avoid n	Applica e of Ind	ian C Uni	for A Citizer incorp	llotn ns/In pora	nent Idian Ited e See	rm No of Per Comp entities e Rule 1 nying inst	mane banies s form	ent Acc s/Entit ned in	coun ies in India mples	nt Nu ncor a]	mbe pora e filling	r ted i	n In form	dia/	*				10			
	Assessing o	officer (A	0 00	ode)																		A	
	Area code		AC) type	T	1	Range	code	T	A	O No								<			1.	
				T	-				-	1	1	CTA.		-		1	12.0						
I/W	/e hereby request that a permanent ac /e give below necessary particulars:							12 6	2				Ľ			gnatu	re / Le	ft Thu	mb Ir	npres	sion		
1	Full Name (Full expanded name to	be ment	ione	d as a	ppea	aring	in pro	of of	identit	y/dat	e of	birth	add	ess	docu	ume	nts:	initi	als a	ire n	not p	berm	it
	Please select title, 🖌 as applicable		Shr	i		Smt	. [K	umari		M/s	5	and and							_		_	
	Last Name / Surname	5	A	MS	SL	15	JP	tM	AN	i													
	First Name	M	A	HF	t M	nM	AI	2											-		1	S	
	Middle Name	S	K																				
2	Abbreviations of the above name,	as you v	woul	d like	it, to	o be j	printed	d on t	he PAN	l car	ď												
		SK		SA	-		UJ	1 1	AM	-	-		T	Γ			T		T				
				-					-		T			T									
3	Have you ever been known by any	other n	ame	2	T	Ye	s		No		No.				(pl	easi	e ticl	(as	app	lica	ble)		Bang
3	If yes, please give that other name	ounor n					FileAlds	- <u>-</u>	Contraction of the														
	Please select title, 🗸 as applicable		Shr	i	1	Smt	. [K	umari		M/	s											
			1		1-		P A	12	~ 1	14	4	M											
	Last Name / Sumame	1.1.1																					
	Last Name / Sumame	24																					
	First Name					-				+				+			T						
4	First Name Middle Name Gender (for Individual applicants of			Ma				nale		- Constant	ansg				19(3-075))		e ticl						
4	First Name Middle Name	nent/Pa	rtner	2342625		rust [ition o	- Constant	Strengt St				19(3-075))								
	First Name Middle Name Gender (for Individual applicants of Date of Birth/Incorporation/Agreen Day Month Year IG 05 I 98 Details of Parents (applicable only Whether mother is a single parent and Yes No (please tick as applicable)	ment/Pa 2 / for ind nd you w plicable)	ividu ish te	⊐ ship (al ap) o appl	or Tr plica y for	ents) PAN	Deed/ F	∙orma nishin		J f Bo	dy of	indi	vidu		or As								
5	First Name Middle Name Gender (for Individual applicants of Date of Birth/Incorporation/Agreen Day Month Year IIG 05 II98 Details of Parents (applicable only Whether mother is a single parent and Yes No (please tick as applify year of the state of the	ment/Pa	ividu ish te ropri	al apply ate sp	or Tr plica y for ace	ents) PAN provi	Deed/ F by furr de belo	Forma	g the n	f Boo	dy of of yo	indi our m	vidua	onl	or As y?	soc	iatio	n of	Per	son	S		
5	First Name Middle Name Gender (for Individual applicants of Date of Birth/Incorporation/Agreen Day Month Year IIG 05 II98 Details of Parents (applicable only Whether mother is a single parent at Yes No (please tick as ap If yes, please fill in mother's name in Father's Name (Mandatory except)	ment/Pa	ividu ish to ropri noth	al applo ate sp er is a	or Tr plica y for ace a sin	nts) PAN provi	Deed/ F by furr de belo parent	Formanishin ow. and F	g the n	f Boo	dy of of yo	indi our m	vidua	onl	or As y?	soc	iatio	n of	Per	son	S		
5	First Name Middle Name Gender (for Individual applicants of Date of Birth/Incorporation/Agreen Day Month Year Day Month Year Day Month Year Day Month Year Details of Parents (applicable only Whether mother is a single parent at Yes No (please tick as ap If yes, please fill in mother's name in Father's Name (Mandatory except) Last Name / Surname	ment/Pa	ividu ish to ropri noth	al applo ate sp er is a	or Tr plica y for ace a sin	nts) PAN provi	Deed/ F by furr de belo	Formanishin ow. and F	g the n	f Boo	dy of of yo	indi our m	vidua	onl	or As y?	soc	iatio	n of	Per	son	S		
5	First Name Middle Name Gender (for Individual applicants of Date of Birth/Incorporation/Agreen Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Month Year Month Year Details of Parents (applicable only Whether mother is a single parent at Yes No (please tick as ap If yes, please fill in mother's name in Father's Name (Mandatory except Last Name / Surname First Name	ment/Pa	ropri noth	al apple ate sp er is a	plica y for ace a sin	nts) PAN provi	by furr de belo parent	Formanishin ow. and F	g the n	f Boo	dy of of yo	indi our m	vidua	onl	or As y?	soc	iatio	n of	Per	son	S		
5	First Name Middle Name Gender (for Individual applicants of Date of Birth/Incorporation/Agreen Day Month Year Day Month Year Day Month Year Day Month Year Details of Parents (applicable only Whether mother is a single parent at Yes No (please tick as ap If yes, please fill in mother's name in Father's Name (Mandatory except) Last Name / Surname	nent/Pa for ind nd you w plicable) the app where r	ividu ish to ropri moth	al apple ate sp er is a H	plica y for ace a sin	PAN provingle p	by furr de belo parent	Formanishin ow. and F	g the n	ame	of yo	vy fu	vidu: other	ing	y?		e of I	moti	Per	son: only	S		
5	First Name Middle Name Gender (for Individual applicants of Date of Birth/Incorporation/Agreen Day Month Year Day Month Year Day Month Year Day Month Year Day No for the second second Whether mother is a single parent at Yes No (please tick as ap If yes, please fill in mother's name in Father's Name (Mandatory except Last Name / Surname First Name	nent/Pa for ind nd you w plicable) the app where r	ividu ish to ropri moth	al apple ate sp er is a H	plica y for ace a sin	PAN provingle p	by furr de belo parent	Formanishin ow. and F	g the n	ame	of yo	vy fu	vidu: other	ing	y?	soc	e of I	moti	Per	son: only	S		
5	First Name Middle Name Gender (for Individual applicants of Date of Birth/Incorporation/Agreed Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Monther is a single parent at Yes No (please tick as ap If yes, please fill in mother's name in Father's Name (Mandatory except Last Name / Surname First Name Middle Name Mother's Name (optional except w	nent/Pa for ind nd you w plicable) the app where r	ividu ish to ropri moth	al apple ate sp er is a H	plica y for ace a sin	PAN provingle p	by furr de belo parent	Formanishin ow. and F	g the n	ame	of yo	vy fu	vidu: other	ing	y?	soc	e of I	moti	Per	son: only	S		
5	First Name Middle Name Gender (for Individual applicants of Date of Birth/Incorporation/Agreen Day Month Year Day No (please tick as applicable only Whether mother is a single parent and Yes No (please tick as applif yes, please fill in mother's name in Father's Name (Mandatory except) Last Name / Surname First Name Middle Name First Name Middle Name	r for ind nd you w plicable) the app where r	ividu ropri moth	ate sp er is a H	plica y for ace a sin Sing	ants) PAN provii ngle p 1 P 1 P 1 P	by furr de belo parent R rent ar	Forma	g the n	ame appl	dy of of yo ied b	y fui	other	ing	y?	soc	e of I	moti	Per	son: only	S		
5	First Name Middle Name Gender (for Individual applicants of Date of Birth/Incorporation/Agreen Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day No (please tick as applicable only Whether mother is a single parent and Yes No (please tick as applifyes, please fill in mother's name in Father's Name (Mandatory except) Last Name / Surname First Name Middle Name First Name Middle Name Select the name of either father or m Father's name Mother Select the name of either father or m Father's name Mother	nent/Pa	ividu roprii noth A A A b A b then b ich y	ate spler is a spler i	or Tr plica y for ace a sin sing sing ay lil	ants) PAN provingle r PAN PAN PAN PAN PAN PAN PAN PAN PAN PAN	by furr de belo parent A A A A A A A A A A A A A A A A A A A	Forma	g the n PAN is N is ap n PAN (e)	ame appl ame card	dy of your of	indi	other	ing ig th	y? the n	name me e	e of r	moti	Per	only	s)		Nr Nr
6	First Name Middle Name Gender (for Individual applicants - Date of Birth/Incorporation/Agreen Day Month Year Day Month Year Mother's Name (Mandatory except of Last Name / Surname First Name Middle Name Select the name of either father or m Father's name Mother (In case no option is provided then for by furnishing name of the mother or m	nent/Pa	ividu roprii noth A A A b A b then b ich y	ate spler is a spler i	or Tr plica y for ace a sin sing sing ay lil	ants) PAN provingle r PAN PAN PAN PAN PAN PAN PAN PAN PAN PAN	by furr de belo parent A A A A A A A A A A A A A A A A A A A	Forma	g the n PAN is N is ap n PAN (e)	ame appl ame card	dy of your of	indi	other	ing ig th	y? the n	name me e	e of r	moti	Per	only	s)) J
5	First Name Middle Name Gender (for Individual applicants of Date of Birth/Incorporation/Agreent Day Month Year Day No (please tick as applicable only Whether mother is a single parent at Yes No (please tick as applicable only Whether mother is a single parent at Yes No (please tick as applicable only Whether mother is a single parent at Yes No (please tick as applicable only Whether mother is a single parent at Yes No (please tick as applicable only Whether mother is a single parent at Yes No (please tick as applicable only Whether mother is a single parent at Select Name (Mandatory except we Last Name / Surname First Name Middle Name Select the name of either father or mon Father's name Mother (In case no option is provided then by furnishing name of the mother or Address	nent/Pa	ividu roprii noth A A A b A b then b ich y	ate spler is a spler i	or Tr plica y for ace a sin sing sing ay lil	ants) PAN provingle r PAN PAN PAN PAN PAN PAN PAN PAN PAN PAN	by furr de belo parent A A A A A A A A A A A A A A A A A A A	Forma	g the n PAN is N is ap n PAN (e)	ame appl ame card	dy of your of	indi	other	ing ig th	y?	name me e	e of r	moti	Per	only	s)		
6	First Name Middle Name Gender (for Individual applicants of Date of Birth/Incorporation/Agreen Day Month Year Ig Ig O Date of Birth/Incorporation/Agreen Day Month Year Ig Month Year Ig Ig O Date of Birth/Incorporation/Agreen Day Month Year Ig Ig O Details of Parents (applicable only Whether mother is a single parent and Yes No (please tick as ap If yes, please fill in mother's name in Father's Name (Mandatory except) Last Name / Surname First Name Middle Name Select the name of either father or m In case no option is provided then for the py furnishing name of the mother or Address Residence Address	nent/Pa	ividu ropri- noth A A other hich	ship o al apply ate sp er is a HI NC r is a s you m (P) be iss	or Tr plica y for ace a sin A t Sing ay lil lease ued	ants) PAN provingle r PAN PAN PAN PAN PAN PAN PAN PAN PAN PAN	by furr de belo parent 1A1 rent ar be prin as app father's	Forma	g the n PAN is N is ap n PAN e) e exce	ame appl ame card	dy of your of	indi	other	ing ig th	y?	name me e	e of r	moti	Per	only	s))))))))
6	First Name Middle Name Gender (for Individual applicants of Date of Birth/Incorporation/Agreent Day Date of Birth/Incorporation/Agreent Day Date of Birth/Incorporation/Agreent Day Month Year I I Month Year I I I I Month Year I I Month Year I I Month Year I I Month Year I I Yes No (please tick as ap If yes, please fill in mother's name in Father's Name (Mandatory except) Last Name / Surname First Name Middle Name Select the name of either father or noneline father's name Middle Name Select the name of either father or noneline father's name Mother In case no option is provided then for the y furnishing name of the mother or noneline father's name Address Residence Address Flat / Room / Door / Block No.	nent/Pa	ividu roprii moth A A A A A A A A A A A A A A A A A A A	ship o al apply ate sp er is a H (N (r is a s you m (P) be iss	or Tr plica y for ace a sim A t Sing Leasu ued	Ants) PAN provingle r PAN Provingle r PAN PAN PAN PAN PAN PAN PAN PAN PAN PAN	by furr de belo parent A P R rent ar be prin as app father's	Forma	g the n PAN is N is ap n PAN e) e exce	ame appl ame card	dy of your of	indi	other	ing ig th	y?	name me e	e of r	moti	Per	only	s)		
6	First Name Middle Name Gender (for Individual applicants of Date of Birth/Incorporation/Agreent Day Date of Birth/Incorporation/Agreent Day Day Month Year Image: Date of Birth/Incorporation/Agreent Day Day Month Year Image: Day Month Year Image: Day Day Month Year Image: Day Details of Parents (applicable only Whether mother is a single parent at Yes No (please tick as ap If yes, please fill in mother's name in Father's Name (Mandatory except) Last Name / Surname First Name Middle Name Select the name of either father or monther of Father's name Middle Name Select the name of either father or monther or	nent/Pa	ividu ropri- moth A A A A A A A A A A A A A A A A A A A	ship o al apply ate sp er is a HI NC ris a s you m (P) be iss	or Tr plica y for ace a sin A t Sing ay lil leasu ued	Ants) PAN provingle r PAN PAN PAN PAN PAN PAN PAN PAN PAN PAN	by furr de belo parent A R rent ar be prin as app father's	Forma	g the n PAN is N is a n PAN e e exce	ame appl ame card	dy of your of	indi	other	ing ig th	y?	name me e	e of r	moti	Per	only	s)		
6	First Name Middle Name Gender (for Individual applicants of Date of Birth/Incorporation/Agreen Day Month Year JG JS JS No (please tick as ap If yes, please fill in mother's name in Father's Name (Mandatory except) Last Name / Surname Middle Name Select the name of either father or m Father's name Mother In case no option is provided then for JS Father's name In case no option is provided then for Address Flat / Room / Door	nent/Pa	ividu roprii moth A A A A A A A A A A A A A A A A A A A	ship o al appl ate sp er is a H N C is a s Vou m (P) be iss	or Tr plica y for ace a sin A t sing ay lil leasuued	Ants) PAN provingle r PAN PAN PAN PAN PAN PAN PAN PAN PAN PAN	by furr de belo parent A P R rent ar be prin as app father's	Forma	g the n PAN is N is a n PAN e e exce	ame appl ame card	dy of your of	indi	other	ing ig th	y?	name me e	e of r	moti	Per	only	s)		
6	First Name Middle Name Gender (for Individual applicants of Date of Birth/Incorporation/Agreent Day Date of Birth/Incorporation/Agreent Day Day Month Year Image: Date of Birth/Incorporation/Agreent Day Day Month Year Image: Day Month Year Image: Day Day Month Year Image: Day Details of Parents (applicable only Whether mother is a single parent at Yes No (please tick as ap If yes, please fill in mother's name in Father's Name (Mandatory except) Last Name / Surname First Name Middle Name Select the name of either father or monther of Father's name Middle Name Select the name of either father or monther or	nent/Pa	ividu roprii moth A A A A A A A A A A A A A A A A A A A	ship o al appl ate sp er is a H N C is a s you m (P) be iss	or Tr plica y for ace a sin A t Sing ay lil leasu ued	Ants) PAN provingle r PAN PAN PAN PAN PAN PAN PAN PAN PAN PAN	by furr de belo parent A R rent ar be prin as app father's	Forma	g the n PAN is N is a n PAN e e e e C R	ame applie card pt wh	dy of your of	indi	other nish ishin ishin ishin ishin	ing ig th	y?	name me e	e of r	moti	Per	only	s)		

ä.

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 Office Address for Communication Pale Office Address for Communication Pale Palephone Number & Email ID details Country code Area/STD Code	
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 Address for Communication Telephone Number & Email ID details	
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 Address for Communication Telephone Number & Email ID details	
Road / Street / Lane/Post Office Area / Locality / Taluka/ Sub- Division Town / City / District State / Union Territory Pincode / Zip code Country Name Country Name Address for Communication Telephone Number & Email ID details	
Area / Locality / Taluka/ Sub- Division D <td>Ξ</td>	Ξ
Town / City / District DO Pincode / Zip code Country Name State / Union Territory Pincode / Zip code Country Name MEST BENGAL 721655 INDIA Address for Communication Residence Office (Please tick as applicable Telephone Number & Email ID details	
State / Union Territory Pincode / Zip code Country Name WEST BENGAL 721655 INDIA Address for Communication Residence Office (Please tick as applicable Telephone Number & Email ID details ID details ID details ID details	- 1
Address for Communication Residence Office (Please tick as applicable Telephone Number & Email ID details	
Telephone Number & Email ID details	
)
Country code Area/STD Code Telephone / Mobile number	
+91 9732336066	
Email ID SONTUMOHAMMEDOUMAIL.COM.	
Status of applicant	
Please select status, 🖌 as applicable	
Individual Hindu undivided family Company Partnership Firm Association of Pe	rsons
Trusts Body of Individuals Local Authority Artificial Juridical Persons Limited Liability P	artners
Registration Number (for company, firms, LLPs etc.)	artificio
2 In case of a person, who is required to quote Aadhaar number or the Enrolment ID of Aadhaar application form as per section 139	
Please mention your AADHAAR number (if allotted) 945299334890	AA
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	
MAHAMMAD SK SAMSUJJAMAN	
3 Source of Income Please select, 🗸 as ap	oplicab
Salary Capital Gains	
Income from Business / Profession Business/Profession code For Code: Refer instructions]	ources
Income from House property	5
A Representative Assessee (RA)	
Full name, address of the Representative Assessee, who is assessible under the Income Tax Act in respect of the person, whose particula	rs 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	
	The second second
Address	
Address	
Address Flat / Room / Door / Block No.	
Address Flat / Room / Door / Block No. Name of Premises / Building / Village	
Address Flat / Room / Door / Block No. Name of Premises / Building / Village Road / Street / Lane/Post Office Area / Locality / Taluka/ Sub- Division Town / City / District	
Address Flat / Room / Door / Block No. Name of Premises / Building / Village Road / Street / Lane/Post Office Area / Locality / Taluka/ Sub- Division	
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	
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 Documents submitted as Proof of Identity (POI), Proof of Address (POA) and Proof of Date of Birth (POB)	
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 Image: Submitted as Proof of Identity (POI), Proof of Address (POA) and Proof of Date of Birth (POB) I/We have enclosed	,
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 Image: State / Union Territory Image: State / Union Territory Image: State / Un	
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 Documents submitted as Proof of Identity (POI), Proof of Address (POA) and Proof of Date of Birth (POB) I/We have enclosed AADHAR as proof of address and AADHAR 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	
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 Image: Proof of Identity (POI), Proof of Address (POA) and Proof of Date of Birth (POB) I/We have enclosed AADHAR as proof of identity, AADHAR 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	, ,
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 Pincode Image: Provide a specified in Rule 114 of I.T. Rules, 1962) for list of mandatory certified documents to be submitted as applicable I/We Instructions (as specified in Rule 114 of I.T. Rules, 1962) for list of mandatory certified documents to be submitted as applicable I/We Interpret Annexure B & Annexure C are to be used wherever applicable	
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 Documents submitted as Proof of Identity (POI), Proof of Address (POA) and Proof of Date of Birth (POB) IWe have enclosed AADHAR as proof of identity, (PADHAR) 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] IWe [MAHAPIMAD SK SAMSUJJAMAN, the applicant, in the capacity of do hereby declare that what is stated above is true to the best of my/our information and belief.	
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 Documents submitted as Proof of Identity (POI), Proof of Address (POA) and Proof of Date of Birth (POB) IWe have enclosed AADHAR as proof of address and AADHAR 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] IWe [MAHARMAR Annexure B & Annexure C are to be used wherever applicable] IWe [MAHARMAR ANNExure A, Annexure B & Annexure C are to be used wherever applicable] IWe [MAHARMAR ANNExure A, Annexure B & Annexure C are to be used wherever applicable] IWe [MAHARMAR ANNE SAMSUJJAMIN], the applicant, in the capacity of [MARARMAR ANNExure A, Annexure B & Annexure C are to be used wherever applicable]	jjam



NO.	ভারতীয় বিশিষ্ট পরিচয় প্রা Unique Identification A	ধিকরণ authority of India
Address:	Narayandari,পূর্ব মেদিনীপুর, 721655 PO: Narayandari,DIST: East	
The land	9452 9933	3 4890