



Payment Date:	08/07/2026 Rs.107.00/-
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Application Date: 08/07/2026

User Name: SALMA16512

Application Mode : Physical Application



[See rule 158]

Application for Allotment of Permanent Account Number
[For an Individual being a Citizen of India]



S. No.	PART A - Personal Information																																																																																																																																																																																											
1	A. Name First Name Middle Name Last Name		<table border="1"><tr><td>P</td><td>I</td><td>J</td><td>U</td><td>S</td><td>H</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>R</td><td>I</td><td>S</td><td>H</td><td>I</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																P	I	J	U	S	H																															R	I	S	H	I																																																																																																																																	
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	B. Name (as per Aadhaar)		<table border="1"><tr><td>P</td><td>I</td><td>J</td><td>U</td><td>S</td><td>H</td><td></td><td>R</td><td>I</td><td>S</td><td>H</td><td>I</td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																P	I	J	U	S	H		R	I	S	H	I																																																																																																																																																														
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3	Date of Birth		<table border="1"><tr><td>0</td><td>5</td><td></td><td>0</td><td>1</td><td></td><td>1</td><td>9</td><td>9</td><td>5</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																0	5		0	1		1	9	9	5																																																																																																																																																																
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5	Residence Address Flat/Door/Building Road/Street/ Block/Sector Post Office Area/Locality/Town/City District State/Union Territory		<table border="1"><tr><td>P</td><td>A</td><td>H</td><td>A</td><td>R</td><td>U</td><td>R</td><td></td><td></td><td>F</td><td>A</td><td>I</td><td>R</td><td></td><td>O</td><td>F</td><td>F</td><td>I</td><td>C</td><td>E</td><td></td><td></td><td></td><td></td></tr><tr><td>C</td><td>H</td><td>A</td><td>N</td><td>C</td><td>H</td><td>A</td><td>L</td><td></td><td>1</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>C</td><td>H</td><td>A</td><td>N</td><td>C</td><td>H</td><td>A</td><td>L</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>M</td><td>A</td><td>L</td><td>D</td><td>A</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>M</td><td>A</td><td>L</td><td>D</td><td>A</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="18">WEST BENGAL</td><td colspan="4">PIN/ZIPCODE</td><td>7</td><td>3</td><td>2</td><td>1</td><td>2</td><td>3</td></tr><tr><td colspan="18">Country/Region</td><td colspan="4">INDIA</td></tr></table>																P	A	H	A	R	U	R			F	A	I	R		O	F	F	I	C	E					C	H	A	N	C	H	A	L		1															C	H	A	N	C	H	A	L																	M	A	L	D	A																				M	A	L	D	A																				WEST BENGAL																		PIN/ZIPCODE				7	3	2	1	2	3	Country/Region																		INDIA			
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7	Residential Status (select one as applicable)		☒ Resident ☐ Non Resident ☐ Resident but Not ordinarily Resident																																																																																																																																																																																									
8	Passport Number (mandatory for) (i) Non-Resident (ii) Resident but not ordinarily resident)		<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																																																																																																																																																																																									
9	Taxpayer Identification Number (TIN) in the Country of Residence (if any)		<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																																																																																																																																																																																									
10	Contact Details (i) Mobile Number (ii) Email ID (iii) Landline No. with STD Code (if any)		Country Code <table border="1"><tr><td>9</td><td>1</td><td></td><td></td><td></td></tr></table> Mobile Number <table border="1"><tr><td>8</td><td>1</td><td>6</td><td>7</td><td>4</td><td>7</td><td>5</td><td>9</td><td>2</td><td>7</td></tr></table> <table border="1"><tr><td colspan="16">jahangiralam8476@gmail.com</td></tr></table> Area/STD Code <table border="1"><tr><td></td><td></td><td></td><td></td></tr></table> Landline Number <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																9	1				8	1	6	7	4	7	5	9	2	7	jahangiralam8476@gmail.com																																																																																																																																																										
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PART B - Source of Income																																																																																																																																																																																												
11	Source of Income (select one or more)		☐ Salary ☐ Income from Business/Profession ☐ Income from House Property ☐ ☐ ☒																																																																																																																																																																																									

PART C - Details of Parents

12 Whether mother/father is a single parent? (select one) ☐ Yes ☒ No

13 Father's name
First Name S A N A T A N
Middle Name
Last Name R I S H I

14 Mother's Name
First Name J O S N A
Middle Name
Last Name R I S H I

15 Name of parent to be printed on Permanent Account Number card (select one) ☒ Father ☐ Mother

PART D - Assessing Officer Code (AO Code)

16 AO Code Details
Area Code (i) W B G AO Type (ii) W Range Code (iii) 2 0 8 AO No. (iv) 9 2

PART E - Representative Assessee, if applicable

17 Representative Assessee Name
First Name
Middle Name
Last Name

18 Permanent Account Number (if any)

19 Aadhaar Number (if Permanent Account Number is not available)

20 Representative Assessee Address
Flat/Door/Building
Road/Street/Block/Sector
Post Office
Area/Locality/Town/City
District
State/Union Territory
Country/Region PIN/ZIPCODE

21 Contact Details
(i) Mobile Number Country Code Mobile Number
(ii) Email ID
(iii) Landline No. with STD Code (if any) Area/STD Code Landline Number

Part F: Communication Address

22 Address for Communication (select one) ☒ Residence Address ☐ Representative Assessee Address ☐ Office Address

Part G: Declaration by Applicant or by Representative Assessee on behalf of the Applicant

23 Documents submitted as Proof of Identity, Proof of Address and Proof of Date of Birth of the Applicant
(i) Proof of Identity AADHAAR Card issued by UIDAI (In Copy)
(ii) Proof of Address AADHAAR Card issued by UIDAI (In Copy)
(iii) Proof of Date of Birth Voters ID card (In Copy)

24 Documents submitted as Proof of Identity, Proof of Address of Representative Assessee
(i) Proof of Identity
(ii) Proof of Address

Verification & Declaration

a. I, PIJUSH RISHI, in the capacity of SELF (Self/Representative Assessee) do hereby declare that what is stated above is true to the best of my knowledge and belief.

b. I declare that the applicant does not possess Permanent Account Number and shall be liable for legal consequences under Income-tax Act, 2025 if this declaration is found to be incorrect.

Place MALDA

Date 08/07/2026

Signature / Left Hand Thumb Impression of Applicant or Representative Assessee

(Signature / Left Hand Thumb Impression of Applicant or Representative Assessee)

Name: PIJUSH RISHI

SFI F