## FORM No. 49A

Only 'Individuals' to affix recent

## APPLICATION FOR ALLOTMENT OF PERMANENT ACCOUNT NUMBER [IN THE CASE OF INDIAN CITIZENS/INDIAN COMPANIES/ENTITIES INCORPORATED IN INDIA/

Only 'Individuals' to affix recent

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Road/Street/ Lane/Post Office				
Area / Locality / Taluka/ Sub- Division				
Town / City / District				
State / Union Territory		Pincode / Zip code Co	ountry 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 Co	ountry Name	
8 Address for Communication		Residence	Office (Please	tick as applicable)
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Please mention your AADHAAR number (if all	otted)			
13 Source of Income			Please select	t status, as applicable
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14 Representative Assessee (RA)  Full name, address of the Representative Assesse	n who is associble	n under the Income Tay Act in roon	act of the narron, whose particulars h	ave been given in the column 1
13.	e, who is assessible	e under the income rax Act in resp	ect of the person, whose particulars in	ave been given in the column 1-
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