



Certified and Authorized



Under the Income –Tax Act 1961

Registered Mutual Fund Advisor



Contact Us:- info@arssolutions.co.in +91 9022838615
www.arssolutions.co.in

ACKNOWLEDGEMENT	
Received ₹ 107/- (inclusive of applicable taxes) with thanks from Shri/Smt/Kum/M/s	
CSF application Sr. no.	
Date of Receipt	
Processing Fee Coupon no.	
Service Tax Regn. No. : (AAACU4411CST002) PAN Service Center Code :- PAN Service Center Name :-	Authorized Signatory (With date stamp)

Request For New PAN Card Or/ And Changes Or Correction in PAN Data

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

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

Permanent Account Number (PAN)

PAN grid

Please read Instructions 'h' & 'i' for selecting boxes on left margin of this form.

Signature/Left thumb impression across this photo

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 [] Smt [] Kumari [] M/s

Signature/Left thumb impression

Last Name / Surname

First Name

Middle Name

Name you would like it printed on the PAN card

2 Father's Name (Only 'individual' applicants : 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)

3 Date of Birth/Incorporation/Agreement/Partnership/Trust Deed/ Formation of Body of individuals or Association of Persons

Day, Month, Year grid

4 Gender (for 'Individual' applicant only)

[] Male [] Female (Please tick as applicable)

5 Photo Mismatch

[] Signature Mismatch

7 Address for Communication

[] Residence [] Office (Please tick as applicable)

Name of Office (to be filled only in case of office 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

8 If you desire to update your other address also, give required details In additional sheet.

9 Telephone Number & Email ID details

Country code, Area/STD/Code, Telephone / Mobile number grid

Email ID

10 AADHAAR number (if allotted)

AADHAAR number grid

11 Mention other Permanent Account Numbers (PANs) inadvertently allotted to you

PAN 1

PAN 3

PAN 2

PAN 4

12 Verification

I/We [] , 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.

I/We have enclosed [] (number of documents) in support of proposed changes/corrections.

Place []

Date grid with DDMMYYYY labels

Signature / Left Thumb Impression of Applicant (inside the box)