



Application Number: A117177702
 Payment Reference: 89752612014616314202 / PY0168988102
 Payment Date: 12/01/2026 Rs.107.00/-

Inward Number / Bar Code

Application Source: EWALLET - A19 - SPICE MONEY LIMITED Application Date: 12/01/2026

User Id: 772942 User Name: 772942

PAN CARD MODE : Both physical PAN and e-PAN Card Application Mode : Physical Application



Form No. 49A

Application for Allotment of Permanent Account Number
 [In the case of Indian Citizens/ Indian Companies/ Entities incorporated in India/
 Unincorporated entities formed in India]

See Rule 114

To avoid mistakes, please follow the accompanying instructions and examples before filling up the form

Assessing officer (AO code)

Area code			AO type			Range code			AO No.		
D	L	C	W	X		1	1	2	1		

Abhibil Sekh

Signature/Left Thumb Impression

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 Smt. Kumari M/s

Last Name / Surname

S E K H

First Name

A B H A I B I L

Middle Name

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

A B H A I B I L S E K H

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 Smt. Kumari 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: 1 2 Month: 0 4 Year: 2 0 0 2

6 Details of Parents (applicable only for individual applicants),

Whether mother is a single parent and you wish to apply for PAN by furnishing the name of your mother only? Yes No (please tick as applicable)
 If yes, please fill in mother's name in the appropriate space provided below.

Fathers's Name (Mandatory except where mother is a single parent and PAN is applied by furnishing the name of mother only)

Last Name / Surname

S E K H

First Name

S A B U R A L I

Middle Name

Mothers's Name (optional except where mother is a single parent and PAN is applied by furnishing the name of mother only)

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 except where mother is a single parent and you wish to apply for

PAN by furnishing name of the mother only) Father's name Mother's Name (please tick as applicable)

7 Address

Residence Address

Flat / Room / Door / Block No.

D H E M N A M A R A

Name of Premises / Building / Village

D H E M N A M A R A

Road / Street / Lane/Post Office

P A N C H M U R A

Area / Locality / Taluka/ Sub- Division

S O N A J H O R E

Town / City / District

B A N K U R A

State / Union Territory

Pincode / Zip code

Country Name

W E S T B E N G A L 7 2 2 1 5 6 I N D I A

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

8 Address for Communication Residence Office (Please tick as applicable)

9 Telephone Number & Email ID details
Country code: 9 1 Area/STD Code: Telephone / Mobile number: 9 2 3 9 1 9 6 2 4 6

Email ID: sajahanmallick469@gmai.com

10 Status of applicant
Please select status, as applicable
 Individual Hindu undivided family Company Partnership Firm Association of Persons
 Trusts Body of Individuals Local Authority Artificial Juridical Persons Limited Liability Partnership

11 Registration Number (for company, firms, LLPs etc.)

12 In Case of a person, who is required to quote Aadhaar number/The Enrolment ID of Aadhaar application form as per section 139AA
Please mention your AADHAAR number (if allotted) 2 1 2 0 0 4 1 2 4 7 6 6

If AADHAAR number is not allotted, please mention the enrolment ID of Aadhaar application form
N O T A P P L I C A B L E W E F 0 1 1 0 2 0 2 4

Name as per AADHAAR letter/card or as per the Enrolment ID of Aadhaar application form
A B H A I B I L S E K H

13 Source of Income
 Salary Income from House property No income Capital Gains
 Income from Business / Profession Business/Profession code [For Code: Refer instructions] Income from Other sources

14 Representative Assessee (RA)
Full name, address of the Representative Assessee, who is assessable under the Income Tax Act in respect of the person, whose particulars 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
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

15 Documents submitted as Proof of Identity (POI), Proof of Address (POA) and Proof of Date of Birth (DOB)
I/We have enclosed AADHAAR Card issued by as proof of identity, AADHAAR Card issued by UIDAI as proof of address and AADHAAR Card issued by UIDAI 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] [Annexure A, Annexure B & Annexure C are to be used wherever applicable]

16 I/We ABHAIBIL SEKH, the applicant, in the capacity of HIMSELF/HERSELF do hereby declare that what is stated above is true to the best of my/our information and belief.

Place: SALIORA

Date: 1 2 0 1 2 0 2 6

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

भारत सरकार
Government of India

Abhaibil Sekh
Father : Saburali Sekh
DOB : 12/04/2002
Male



2120 0412 4766

आधार - आम आदमी का अधिकार

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

Address:
Dhemnamara, Sonajhor, Bankura, Panchmura, West
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Abhaibil Sekh