	Only 'Individuals' to affix recent photograph (3.5 cm x	[lr	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 mistake (s), please follow the accompanying instructions and examples before filling up the form Assessing officer (AO code)															Only 'Individuals' to affix recent photograph (3.5 cm x 2.5 cm)													
	2.5 cm)	Ass	sessing	office	r (A	10 co	de))																				2.0	s cm)		
		Α	rea coc	le		AO	ty	ре		I	Ran	ge c	ode			AO	No														
Sign	/ Left Thumb impression																														
	across this photo																														
	/e hereby request that			iccoun	t nu	umber	be	allc	otteo	d to r	ne/เ	IS.																			
I/W	le give below necess																							e / Le	_					_	
1	Full Name (Full ex	-			enti	oned	as	app	pea	ring	in p	roof	ofi	denti	ty/d	ate	of k	oirth/	/add	dre	ss d	ocu	mer	nts:	ini	tials	are	e no	ot pe	ermi	tted)
	Please select title,	🖌 as a	pplicabl	e		Shri				Smt.			Ku	mari			M/s	;								_					
	Last Name / Surnar	ne																										\perp			
	First Name			ļ																							\perp	\perp			
	Middle Name																														
2	Abbreviations of t	he abov	e name	, as yo	ou v	vould	lik	ce it	, to	be p	orint	ed c	on th	e PA	N ca	ard															
																												Γ	Τ		\square
																												Ē	Ť		\square
3	Have you ever bee	en know	n by an	y othe	er na	ame?				Ye	s		Ċ	No								(ple	ase	tick	as	s ap	plic	ab	le)		
	If yes, please give tha	t other nai	me	-		_		_]					_																
	Please select title,	🖌 as a	pplicabl	e		Shri				Smt.			Ku	mari			M/s	6													
	Last Name / Surnar	ne																													
	First Name																														
	Middle Name																														
4	Gender (for Indivi	dual and	11 4 -				м	lale			E	ema	le		т	ran	Isue	ende	r			(ple	ase	tick	as	s ap	plic	ab	le)		
*		uuai app	licants	oniy)				lale				,a				Tan	1090	mao													
5	Date of Birth/Inco				Par	tners			Tru	st D	_			ion c			-			lals		Ass	ocia	atior				ns			
		rporatio			Par	tners			Tru	st D	_			ion c			-			lals		Ass	ocia	atior				ns			
	Date of Birth/Inco	rporatio	n/Agree		Par	tners			Tru	st D	_			ion c			-			uals		Ass	ocia	atior				ns			
	Date of Birth/Inco	rporatio	n/Agree Year	ement/			hip	o or			_			ion c			-			uals		Ass	ocia	ation				ns			
5	Date of Birth/Inco Day Month	rporation	n/Agree Year	ement/	ndiv	vidua	hip I aj	o or ppli	can	its)	eed	/ For	rmat		of Be	ody	-			uals		Ass	ocia	atior				ns			
5	Date of Birth/Incor Day Month	rporation	n/Agree Year	ement/	ndiv	vidua	hip I aj	o or ppli	can	its)	eed	/ For	rmat		of Be	ody	-			lals		Ass	ocia	ation				ons		_	
5	Date of Birth/Incom Day Month	rporation	n/Agree Year	ement/	ndiv	vidua	hip I aj	o or ppli	can	its)	eed	/ For	rmat		of Be	ody	-			Jals		Ass	ocia					ons			
5	Date of Birth/Incom Day Month Discretion Image: Comparison of the second sec	rporation	n/Agree Year	ement/	ndiv	vidua	hip I aj	o or ppli	can	its)	eed	/ For	rmat		of Be	ody	-					Ass		atior							
5	Date of Birth/Incor Day Month	rporation (applica andatory ne	n/Agree Year	ement/	ndiv	vidua	hip I aj	o or ppli	can	its)	eed	/ For	rmat		of Be	ody	-					Ass	ocia								
5	Date of Birth/Incor Day Month	rporation (applica andatory ne ptional)	n/Agree Year	ement/	ndiv	vidua	hip I aj	o or ppli	can	its)	eed	/ For	rmat		of Be	ody	-					Ass									
5	Date of Birth/Incor Day Month	rporation (applica andatory ne ptional)	n/Agree Year	ement/	ndiv	vidua	hip I aj	o or ppli	can	its)	eed	/ For	rmat		of Be	ody	-					Ass									
5	Date of Birth/Incor Day Month Details of Parents Father's Name (Ma Last Name / Surnar First Name Middle Name Mother's Name (or Last Name / Surnar	rporation (applica andatory ne ptional)	n/Agree Year	ement/	ndiv	vidua	hip I aj	o or ppli	can	its)	eed	/ For	rmat		of Be	ody	-					Ass									
5	Date of Birth/Incor Day Month Day Month Date of Birth/Incor Month Father's Name / Surnar Mother's Name (or Last Name / Surnar First Name First Name / Surnar First Name	rporation (applica andatory ne ptional)	n/Agree Year able onl /. Even	y for i marrie	ndiv ed w	vidua vome	hip I aı	ppli shou	can	ts) fill ir	eed	/ For	s na	me o	nly)	ody			/idu			Ass									
5	Date of Birth/Incor Day Month Details of Parents Father's Name (Ma Last Name / Surnar First Name Mother's Name (or Last Name / Surnar First Name Middle Name	rporation (applica andatory ne ptional) ne either fat	n/Agree Year able onl y. Even	y for i marrie	ndiv ed w	vidua vome	hip I al n s	ppli shou	like	ts) fill ir	eed	her':	s na	me o	nly)	ody			/idu			Ass									
5	Date of Birth/Incor Day Month Details of Parents Father's Name (Ma Last Name / Surnar First Name Middle Name East Name / Surnar First Name Mother's Name (or Last Name / Surnar First Name Select the name of	rporation (applica andatory ne ptional) ne either fat	n/Agree Year able onl y. Even	y for i marrie	ndiv ed w	vidua vome	hip I al n s	pplid shou	can IId 1	ts) fill ir	eed	her':	s na	me o	nly)	ody			vidu	nly)	or										
5	Date of Birth/Incor Day Month Details of Parents Father's Name (Ma Last Name / Surnar First Name Middle Name Last Name / Surnar First Name Kother's Name (or Last Name / Surnar First Name Select the name of	rporation (applica andatory ne ptional) ne either fat	n/Agree Year able onl y. Even	y for i marrie	ndiv ed w	vidua vome	hip I al n s	pplid shou	can IId 1	ts) fill ir	eed	her':	s na	me o	nly)	ody			vidu	nly)	or										
6	Date of Birth/Incor Day Month Day Month Details of Parents Father's Name (Mathematication) Last Name / Surnar First Name Middle Name Mother's Name (or Last Name / Surnar First Name Mother's Name (or Last Name / Surnar First Name Middle Name Select the name of (In case no option in	rporation (applica andatory ne ptional) ne either fat s provide	n/Agree Year able onl y. Even	y for i marrie	ndiv ed w	vidua vome	hip I al n s	pplid shou	can IId 1	ts) fill ir	eed	her':	s na	me o	nly)	ody			vidu	nly)	or										
6	Date of Birth/Incor Day Month Day Month Details of Parents Father's Name (Mathematication) Last Name / Surnar First Name Middle Name Middle Name First Name / Surnar First Name Middle Name Select the name of (In case no option in the second) Address	rporation (applica andatory ne ptional) ne either fai s provide	h/Agree Year able onl /. Even	y for i marrie	ndiv ed w	vidua vome	hip I al n s	pplid shou	can IId 1	ts) fill ir	eed	her':	s na	me o	nly)	ody			vidu	nly)	or										
6	Date of Birth/Incor Day Month Day Month Details of Parents Father's Name (Mathematication) Last Name / Surnar First Name Middle Name Mother's Name (Or Last Name / Surnar First Name Middle Name Select the name of (In case no option i Address Residence Address	rporation (applica andatory ne ptional) ne either fat s provide ss Block No	h/Agree Year able onl . Even	y for i marrie	ndiv ed w	vidua vome	hip I al n s	pplid shou	can IId 1	ts) fill ir	eed	her':	s na	me o	nly)	ody			vidu	nly)	or										
6	Date of Birth/Incor Day Month Day Month Details of Parents Father's Name (Mathematication) Last Name / Surnar First Name Middle Name Mother's Name (or Last Name / Surnar First Name Middle Name Select the name of (In case no option i Address Flat / Room / Door /	rporation (applica andatory ne ptional) ne either fai s provide ss Block No Building	h/Agree Year able onl , Even ther or r ed then l	y for i marrie	ndiv ed w	vidua vome	hip I al n s	pplid shou	can IId 1	ts) fill ir	eed	her':	s na	me o	nly)	ody			vidu	nly)	or										
6	Date of Birth/Incor Day Month Day Month Details of Parents Father's Name (Mail Last Name / Surnar First Name Middle Name Mother's Name (Or Last Name / Surnar First Name Middle Name Select the name of (In case no option i Address Flat / Room / Door / Name of Premises /	rporation (applica andatory ne ptional) ne either fat s provide SS Block No Building /Post Offi	h/Agree Year able onl . Even ther or r ed then l / Village ice	y for i marrie	ndiv ed w	vidua vome	hip I al n s	pplid shou	can IId 1	ts) fill ir	eed	her':	s na	me o	nly)	ody			vidu	nly)	or										
6	Date of Birth/Incor Day Month Day Month Date of Birth/Incor Month Details of Parents East Name (Mathematication) Father's Name / Summar First Name Middle Name Mother's Name (or Last Name / Summar First Name Middle Name Select the name of Select the name of (In case no option in the second sec	rporation (applica andatory ne ptional) ne either fai s provide ss Block No Building / /Post Offi ka/ Sub-	h/Agree Year able onl . Even ther or r ed then l / Village ice	y for i marrie	ndiv ed w	vidua vome	hip I al n s	pplid shou	can IId 1	ts) fill ir	eed	her':	s na	me o	nly)	ody			vidu	nly)	or										
6	Date of Birth/Incor Day Month Day Month Day Month Details of Parents Father's Name (Mathematication) Last Name / Surnar First Name Middle Name Mother's Name (Or Last Name / Surnar First Name Middle Name Select the name of (In case no option i Address Flat / Room / Door / Name of Premises / Road / Street / Lane Area / Locality / Talu	rporation (applica andatory ne ptional) ne either fat s provide s Block No Building / /Post Offi ka/ Sub-	h/Agree Year able onl . Even ther or r ed then l / Village ice	y for i marrie	ndiv ed w	vidua vome	hip I al n s	ppli shou may sue s na	can IId 1	ts) fill ir	eed	her': her': intec	s na	me o	nly)	ody				nly)	or										

	Office Address Name of office		Τ															1	Τ				1			
	Flat / Room / Door / Block No.		+	+		\vdash	\rightarrow	\rightarrow		-	_					\vdash	-	-	+	$\left - \right $	-	-	+	$\left - \right $		
		\vdash	+	+	-	+	+	\rightarrow		-	-				-	-	\vdash	┢	+	\vdash	-	-	+	$\left \right $	\vdash	
	Name of Premises / Building / Village Road / Street / Lane/Post Office		+	\vdash		\vdash	\rightarrow	\rightarrow		-	-					-	-	-	+		-	-	+	$\left - \right $	\vdash	
			+	+	-	\vdash	\rightarrow	\rightarrow		-					\vdash	-	-	-	+	\square	-	-	+	$\left \right $	\vdash	
	Area / Locality / Taluka/ Sub- Division		+	+	-	\vdash	-	+			_					-		-	+		-	-	-	$\left - \right $		
	Town / City / District State / Union Territory		1	ЦЦ Р	Pinco	 ode /	Zip		e l			Со	untry	y Na	me				L							
												• .		, -												
8	Address for Communication				\exists	Res	idar							offic	•			(0	2026	o tiu	- 1/ 2	2 21	aplic		-)	
8 9	Telephone Number & Email ID details			L		Res	luei	ice						me	e			(г	Pleas	eu	Ch a	5 a ₁	phic	anie	<i>)</i>	
9	Country code Area/STD Co	de			Т	elepł	hone	M / ڊ	1obil	e nu	imbe	ər														
					Γ			1								Τ	Τ									
	Email ID																		٦							
10	Status of applicant																									
10	Please select status, \checkmark as applicable																		Г	一,	^		4			
					1					ſ									L				nent			
	Individual Hindu undivide	,	'		i	mpar								rship					Ļ				tion o			
	Trusts Body of Individ				Loc	cal A	utho	rity				Arti	ficia	ıl Ju	ridic	al P	erso	ons	L	L	_imit	ed I	∟iabi	lity F	Partr	nership
11	Registration Number (for company, firm	ns, LLF	's et	.c.)		_	_		-				- 1													
12	In case of a person, who is required to	quote	Aadł	haar	nur	mber	r or f	the I	Enr	olm	ent	ID o	of Aa	adha	aar	app	licat	tion	form	n as	per	' se	ctio	n 139	9 A A	1
	Please mention your AADHAAR number (•																								
	If AADHAAR number is not allotted, pleas	e menti	on th	ne er	nrolr	ment	ID c	of Aa	adha	ar a	ppli	catio	on fo	orm	-		T	T		T		—		,		1
							- 4 ^ c				- atio	fr														
	Name as per AADHAAR letter or card or a	as per u			nen					ippin	Cau	DTI IC	DITT			1			1				1			
			+	+		\vdash	\rightarrow	\rightarrow								\vdash	-	-	+				+	$\left - \right $		
		\vdash	+	\vdash	-	\vdash	+	\rightarrow		-	-					-	\vdash	┢	+	\vdash	-	-	+	\vdash	\vdash	
13	Source of Income																		DIAS		alar	-# [.	1	26.2	nnli	inchin
13	Source of Income																		Plea					as a	ppli	icable
13	Salary		į	-			. [_	_						Сар	oital	Gai	ns			
13	Salary Income from Business / Profession	Busine	ss/Pr	rofes	sior	cod ו	le [(F	or C	ode	e: Re	efer	inst	ructi	ons]			Cap Inco	oital ome	Gai fror				
	Salary Income from Business / Profession Income from House property	Busine	ss/Pr	rofes	sior	ר cod	le [[F	or C	ode	e: Re	efer	inst	ructi	ons]			Cap Inco	oital	Gai fror	ns			
	Salary Income from Business / Profession Income from House property Representative Assessee (RA)							, mu	der								-			Cap Inco No i	oital ome inco	Gai fror me	ns m Ot	her s	sour	ces
	Salary Income from Business / Profession Income from House property) uno	der								-			Cap Inco No i	oital ome inco	Gai fror me	ns m Ot	her s	sour	ces
	Salary Income from Business / Profession Income from House property Representative Assessee (RA) Full name, address of the Representative	Assess	see, v	who	is a	isses) uno	der								-			Cap Inco No i	oital ome inco	Gai fror me	ns m Ot	her s	sour	ces
	Salary Income from Business / Profession Income from House property Representative Assessee (RA) Full name, address of the Representative been given in the column 1-13.	Assess	see, v not p	who	is a itteo	isses	sible		7		Inco			Act			-			Cap Inco No i	oital ome inco	Gai fror me	ns m Ot	her s	sour	ces
	Salary Income from Business / Profession Income from House property Representative Assessee (RA) Full name, address of the Representative been given in the column 1-13. Full Name (Full expanded name : initial	Assess	see, v not p	who	is a itteo	isses d)	sible	> unc	7	the	Inco		Tax	Act			-			Cap Inco No i	oital ome inco	Gai fror me	ns m Ot	her s	sour	ces
	Salary Income from Business / Profession Income from House property Representative Assessee (RA) Full name, address of the Representative been given in the column 1-13. Full Name (Full expanded name : initial Please select title, 🖌 as applicable	Assess	see, v not p	who	is a itteo	isses d)	sible		7	the	Inco		Tax	Act			-			Cap Inco No i	oital ome inco	Gai fror me	ns m Ot	her s	sour	ces
	Salary Income from Business / Profession Income from House property Representative Assessee (RA) Full name, address of the Representative been given in the column 1-13. Full Name (Full expanded name : initial Please select title, \checkmark as applicable Last Name / Surname	Assess	see, v not p	who	is a itteo	isses d)	sible	= un(7	the	Inco		Tax	Act			-			Cap Inco No i	oital ome inco	Gai fror me	ns m Ot	her s	sour	ces
	Salary Income from Business / Profession Income from House property Representative Assessee (RA) Full name, address of the Representative been given in the column 1-13. Full Name (Full expanded name : initial Please select title, ✓ as applicable Last Name / Surname First Name	Assess	see, v not p	who	is a itteo	isses d)	sible	> UN(7	the	Inco		Tax	Act			-			Cap Inco No i	oital ome inco	Gai fror me	ns m Ot	her s	sour	ces
	Salary Income from Business / Profession Income from House property Representative Assessee (RA) Full name, address of the Representative been given in the column 1-13. Full Name (Full expanded name : initial Please select title, \checkmark as applicable Last Name / Surname First Name Middle Name	Assess	see, v not p	who	is a itteo	isses d)	sible		7	the	Inco		Tax	Act			-			Cap Inco No i	oital ome inco	Gai fror me	ns m Ot	her s	sour	ces
	Salary Income from Business / Profession Income from House property Representative Assessee (RA) Full name, address of the Representative been given in the column 1-13. Full Name (Full expanded name : initial Please select title, ✓ as applicable Last Name / Surname First Name Middle Name Address	Assess	see, v not p	who	is a itteo	isses d)	sible		7	the	Inco		Tax	Act			-			Cap Inco No i	oital ome inco	Gai fror me	ns m Ot	her s	sour	ces
	Salary Income from Business / Profession Income from House property Representative Assessee (RA) Full name, address of the Representative been given in the column 1-13. Full Name (Full expanded name : initial Please select title, ✓ as applicable Last Name / Surname First Name Middle Name Address Flat / Room / Door / Block No.	Assess	see, v not p	who	is a itteo	isses d)	sible	> Un(7	the	Inco		Tax	Act			-			Cap Inco No i	oital ome inco	Gai fror me	ns m Ot	her s	sour	ces
	Salary Income from Business / Profession Income from House property Representative Assessee (RA) Full name, address of the Representative been given in the column 1-13. Full Name (Full expanded name : initial Please select title, \checkmark as applicable Last Name / Surname First Name Middle Name Address Flat / Room / Door / Block No. Name of Premises / Building / Village	Assess	see, v not p	who	is a itteo	isses d)	sible	Un(7	the	Inco		Tax	Act			-			Cap Inco No i	oital ome inco	Gai fror me	ns m Ot	her s	sour	ces
	Salary Income from Business / Profession Income from House property Representative Assessee (RA) Full name, address of the Representative been given in the column 1-13. Full Name (Full expanded name : initial Please select title, ✓ as applicable Last Name / Surname First Name Middle Name Flat / Room / Door / Block No. Name of Premises / Building / Village Road / Street / Lane/Post Office	Assess	see, v not p	who	is a itteo	isses d)	sible		7	the	Inco		Tax	Act			-			Cap Inco No i	oital ome inco	Gai fror me	ns m Ot	her s	sour	ces
	Salary Income from Business / Profession Income from House property Representative Assessee (RA) Full name, address of the Representative been given in the column 1-13. Full Name (Full expanded name : initial Please select title, \checkmark as applicable 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	Assess	see, v not p	who	is a itteo	d) Smt.	sible		7	the	Inco		Tax	Act			-			Cap Inco No i	oital ome inco	Gai fror me	ns m Ot	her s	sour	ces
	Salary Income from Business / Profession Income from House property Representative Assessee (RA) Full name, address of the Representative been given in the column 1-13. Full Name (Full expanded name : initial Please select title, \checkmark as applicable 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	Assess	see, v not p	who	is a	d) Smt.	sible	> Un(7	the	Inco		Tax	Act			-			Cap Inco No i	oital ome inco	Gai fror me	ns m Ot	her s	sour	ces
14	Salary Income from Business / Profession Income from House property Representative Assessee (RA) Full name, address of the Representative been given in the column 1-13. Full Name (Full expanded name : initial Please select title, \checkmark as applicable 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	Assess		who ermi	is a	sses	ress] Ku	imar	i i	me	Tax	Act						Cap Inco No i	oital ome inco	Gai fror me	ns m Ot	her s	sour	ces
14	Salary Income from Business / Profession Income from House property Representative Assessee (RA) Full name, address of the Representative been given in the column 1-13. Full Name (Full expanded name : initial Please select title, 🖌 as applicable 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 Documents submitted as Proof of Idem I/We have enclosed	Assess		who ermi	is a	sses		i (PC	Ku	imar	i	me	Tax	Act						Cap Inco No i	oital ome inco	Gai fror me	ns m Ot	her s	sour	ces
14	Salary Income from Business / Profession Income from House property Representative Assessee (RA) Full name, address of the Representative been given in the column 1-13. Full Name (Full expanded name : initial Please select title, 🖌 as applicable 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 Documents submitted as Proof of Idem I/We have enclosed as proof of address and	e Assess	See, v	who eermi []	is a ittec	sses d) Smt. Smt. d) Addr data	ress	i (PC	Ku	the limar	i Prc y, [me	Tax	Act	of E	Birth		of the		Cap Incc No i rson	bital pome inco , wh		part			ces
14	Salary Income from Business / Profession Income from House property Representative Assessee (RA) Full name, address of the Representative been given in the column 1-13. Full Name (Full expanded name : initial Please select title, 🖌 as applicable 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 Documents submitted as Proof of Idem I/We have enclosed as proof of address and [Please refer to the instructions (as specified)	e Assess Is are n Sh L Sh Sh Sh Sh Sh Sh Sh Sh Sh Sh	See, 1	who ermi	is a ittec	sses d) Smt. Smt. d) Smt. d) d d d d d d d d d d d d d d d d d d	ress s pro	(PC)) () (Ku	the limar	i Prc y, [me	Tax	Act	of E	Birth		of the		Cap Incc No i rson	bital pome inco , wh		part			ces
14	Salary Income from Business / Profession Income from House property Representative Assessee (RA) Full name, address of the Representative been given in the column 1-13. Full Name (Full expanded name : initial Please select title, 🖌 as applicable 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 Documents submitted as Proof of Idem I/We have enclosed as proof of address and	e Assess Is are n Sh L Sh Sh Sh Sh Sh Sh Sh Sh Sh Sh	See, 1	who ermi	is a itteo Pinco f of J	Asses	ress s pro	(PC oof o) as (2) fo ble]	Ku	the limar	i	me	Tax	Act	of E	Birth		of the		Cap Incc No i rson	bital pome inco , wh		part			ces
14	Salary Income from Business / Profession Income from House property Representative Assessee (RA) Full name, address of the Representative been given in the column 1-13. Full Name (Full expanded name : initial Please select title, ✓ as applicable 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	e Assess Is are n Sh Sh L L L L L L L L L L L L L L L L L	see, 1 inti i	who ermi	is a ittee itttee ittee	d) Smt. Smt. Smt. Smt. Smt. Smt. Smt. Smt.	ssible	(PC pof o as 2) fo ble] icant	Ku	the limar	Inco	me	Tax	Act	of E	Birth		of the		Cap Incc No i rson	bital pome inco , wh		part			ces
14	Salary Income from Business / Profession Income from House property Representative Assessee (RA) Full name, address of the Representative been given in the column 1-13. Full Name (Full expanded name : initial Please select title, ✓ as applicable 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	e Assess Is are n Sh Sh L L L L L L L L L L L L L L L L L	see, 1 inti i	who ermi	is a ittee itttee ittee	d) Smt. Smt. Smt. Smt. Smt. Smt. Smt. Smt.	ssible	(PC pof o as 2) fo ble] icant	Ku	the limar	Inco	me	Tax	Act	of E	Birth		of the		Cap Incc No i rson	bital pome inco , wh		part			ces
14	Salary Income from Business / Profession Income from House property Representative Assessee (RA) Full name, address of the Representative been given in the column 1-13. Full Name (Full expanded name : initial Please select title, ✓ as applicable 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	Assess Is are n Sh Sh din Rule to be u ve is tru	see, 1 inti i	who ermi	is a ittee itttee ittee	d) Smt. Smt. Smt. Smt. Smt. Smt. Smt. Smt.	ssible	(PC pof o as 2) fo ble] icant	Ku	the limar	Inco	me	Tax	Act	of E	Birth		of the		Cap Incc No i rson	bital pome inco , wh	Gai fror me oose	appl	ticula	ars h	ces