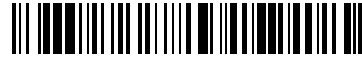


Acknowledgement Number: N- 881031100398153



Form NO. 49A

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

Under section 139A of the Income Tax act, 1961

To avoid mistake (s), please follow the accompanying instructions and examples before filling

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)**Assessing officer (AO code)**

AREA CODE	AO TYPE	Range Code	AO NO
KRL	W	63	1

Sign/ Left Thumb impression

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

NAIR

First Name

HAREESH

Middle Name

RAVEENDRAN

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

HAREESH RAVEENDRAN NAIR

3. Have you ever been known by other name?

If yes, please give that other name

 Yes No

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**5. Date of Birth/Incorporation/Agreement/Partnership or Trust Deed/ Formation of Body of individuals or association of Persons**

Day Month Year

11/01/1991

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

Father's Name (Mandatory - Even married women should fill in father's name only)

Last Name/Surname

NAIR

First Name

RAVEENDRAN

Middle Name

Mother's Name (Optional)

Last Name/Surname

NAIR

First Name

USHA

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)

7. Address**Residence Address**

Flat / Room / Door / Block

Name of Premises / Building /

Road / Street / Lane/Post Office

Area / Locality / Taluka/ Sub-

Town / City / District

State / Union Territory

Pincode / Zip code

Country Name

KERALA

689592

INDIA

Office Address

Name of office

AL-KHADDA INTERNATIONAL

Flat / Room / Door / Block

BLOCK 43

Name of Premises / Building /

AHMADI EAST

Road / Street / Lane/Post Office

FAHAHEEL

Area / Locality / Taluka/ Sub-

AHMADI

Town / City / District AHMADI EAST

State / Union Territory OUTSIDE INDIA Pincode / Zip code 64002 Country Name KUWAIT

8. Address for Communication Residence Office Please tick as applicable

9. Telephone Number & Email ID details

Country code 91 Area/STD Code Telephone / Mobile number 9496848254

Email ID HAREESHCEK007@GMAIL.COM

10. Status of applicant

Please select status, as applicable Government
 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. Please mention your AADHAAR number (if allotted)

811375468554

13. Source of Income

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

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
Name of Premises / Building /
Road / Street / Lane/Post Office
Area / Locality / Taluka/ Sub-
Town / City / District
State / Union Territory Pincode Country Name

15. Documents submitted as Proof of Identity (POI), Proof of Address (POA) and Proof of Date of Birth (DOB)

I/We have enclosed Driving License as proof of identity Driving License as proof of address and Passport 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 HAREESH RAVEENDRAN NAIR 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 KUWAIT

DD MM YYYY

Date 25/07/2016

Signature / Left thumb impression of Applicant (inside the box)