FORM NO. 49A

Form of application for allotment of Permanent Account Number under section 139A of the Income-tax Act, 1961

[To avoid mistake(s), please follow	w the accom	panying instructions To	and examples c	arefully befo	ore filling up o	of the form
The Assessing Officer,		10		Please affi	x your recent	٦
				black and	white	
				cm) (In cas	n (3.5 cm X 2.5 se of	
				Individuals	only)	
				(Signature	e of the	
				applicant inside the	white box	
				provided a	above)	
Sir,						
Whereas my/our total income/ the total in Act,1961, during the accounting year end chargeable to income-tax;						
Whereas my/our case does not fall unde sales/turnover/gross receipts of which ar YYYY)						e total -MM-
Whereas I am/we are required to furnish YYYY)	a return under	sub-section (4A) of sect	tion 139 for the acco	unting year e	nding on	(DD-MM
Whereas I am/we are required to apply f August , 2000, or S.O. No. 1206(E), date	ed 12-12-2001	issued under sub-section	n (1A) of section 139	9A;	, ,	
Whereas my/our case does not fall unde And whereas no Permanent Account Nu			n 139A, but I am/we	are desirous	of obtaining a F	PAN;
Though earlier PAN had been allotted to			under new series ha	as been allotte	ed;	
I/We hereby request that a permanent at I/We give below the necessary particular		/permanent account num	nber under new serie	es be allotted	to me/us:	
1. Full Name (expand initials please)	Please Tick	as applicable	Shri	Smt.	Kuma ri	M/s
DUSHARH INFOSOFT LTD						

Last Name/Surname First Name

2.		ve yo plical	u eve	r be	en kr	nowr	n b	y an	y o	ther	nan	ne?				Ρ	lea	se T	īck		as		Ye	es			١	Ю										
	lf y	ės, pl	ease	give	othe	er na	me	e (ex	pai	nd ir	nitial	s p	leas	se)				Plea	ase	Ticl	k		SI	hri			S	Smt			Κı	uma	ar		Ν	∕l/s		
			cable																												İ							
La	st l	Name	/Surna	ame)														F	irst	Naı	me																
Mide	dle	Name	Э																																			
Ī																																T				T		
3. ່	Ac	ddres	s																			·		!	I		-		·	 -								
A.			ntial A	ddr	ess																																	
Flat	Dο	or/Blo	ock No).																																		
L			1 1		ı ı					ı	1					<u> </u>		<u> </u>					I		I				_									
Nan	ne d	of Pre	mises	/Bu	ilding	g/Vill	ag	e																					_									
Roa	d/S	Street	Lane/	Pos	t Offi	ice																							_									
Area	a/l (ocality	//Talu	ka/S	Sub-F	Divisi	ior	<u> </u>			1					I							1															
, oc			,, . a.a	100,0		1	Ť	·								1																						
Tow	n/C	`itv/D	istrict													<u> </u>							<u> </u>		<u> </u>			<u> </u>										
TOW	11/	JILY/D	ISTRICT				T		1							1												1	7									
L		/I Inia		:40																									J				L	:				
Sta	ate	Onio	n Terr	itory	/		T		1	1	ı		1	1		1	I				I	1	1		1		1	1	1				Р	In		$\overline{}$	1	T
_ L		44:																															<u></u>			<u> </u>		
В.			Addre	SS																																		
Nan	ne d	of Offi	ce		- 1	1	1		1	1	1			1		1	ı			1	ı	1	1		1	1	1	1	7									
Flat	'Do	or/Blo	ock No).									,		,		,		,		,	,				,		,	_									
Nan	ne d	of Pre	mises	/Bu	ilding	g/Vill	ag	e																														
							Ĺ																															
Roa	d/S	Street	Lane/	Pos	t Offi	ice	<u> </u>				1	1	1	1	1		1	1	1	1	1	1	1				1	1	_									
Ĩ					Ť	1																																
۱ ۱	\	acalit	//Talu	ka/9	Sub F)ivic	ion						1	1	1		<u> </u>	1	<u> </u>	1	1	 	I		1	<u> </u>	1	1	_									

Area/Locality/Taluka/Sub-Division

own/City/District								
State/Union Territory				Pir	1			
State/Official Territory					I			
						<u> </u>		
4. Address for Communication applicable A	Please tick	as o	r B	Tel. No., i	any			I
Status of the Applicant		<u>ıs appli</u> cable (or	nly one box)					
Individual	P							
Hindu Undivided Family	Н							
Company	С							
Firm	F							
Association of Persons	A							
Association of Persons (Trusts)	T							
Body of Individuals Local Authority	B L							
Artificial Juridical Person	J							
 If an individual, please give fa Last Name/Surname 	ther's name (ex	oand initials pleas	e)	First Name				
/liddle Name								
7. Sex (for Individual Appli	cant only)	Please Tick as	applicable		Male	Femal e		
B. Date of Birth/Incorporation/	Agreement/Partr	ership or Trust De	eed/Formation o	of Body of Indivi	duals/Association	on of Persons		
9. Whether Citizen of India	? Please	e Tick as applica	able		Yes	No)	
10. Registration number (in							I .	
11. Source(s) of Income		Please Tick	as applicable					
			-11	I				
Salarie House		Business or		Capital	Incom	e from other		
s Propert	y	Profession		gains	source			
2. Particulars of Business, if a		•				•	•	
HEAD OFFICE	•							

Name of Office

Flat/	Doo	/Blo	ck N).			-		-	-	-	-									1	l								<u> </u>	<u> </u>	 	 		 		
Nam	e of	Prer	nises	/Bui	ldin	g/Vi	llag	ge		- 1								1							1	-											
Roa	d/Str	eet/l	ane	'Pos	t Of	fice												1							1			-	I								
Area	/Loc	ality	/Talu	ka/S	ub-	Divi	sio	n													1					-											
Tow	n/Cit	y/Dis	strict											,						-						-	-										
Sta	ite/L	nion	Teri	itory													1																Pir	1			
В	RAN	ICHE	nmer ES (I he Bi	requ	uire	•						ate	sh	eet,	, in	the	forr	nat	giv	en k	pelo	w, fo	or e	each			of b h)	ora	ncr	nes							
N	ame	OI	ne Bi	ancr	1		1				ı	1		1	1	1					1	1			1			1					1	T	1		\top
F				\vdash			-				-	-		-						+														-	-	-	+
		/DI	-1 81																																		<u></u>
Flat/	D00	/BIO	ck N). 			-		- 1	I			1	1	1	1		T		ı		1		1		1											
<u> </u>		D		/D.::	Lation	/\ /:	11																														
nam T	e or	Prer	nises	S/Bui	Iair	ig/VI	IIa	ge	1				1	T			1	T		1				T			1	1	1								
Doo.	1/0+	004/	one	/Door	. 01	fice							ļ	ļ																							
Roa	J/Sti	eet/i	ane	POS		lice							1	1		1		T																			
_ ^ د د د	/1 00	olity	⊥ ⊥ /Talu	ko/S	<u> </u>	Divi	oio.						<u> </u>																								
AIG	/LOC	anty	l alu	ra/S	ub-	ואוטי	510	11					1	1	T			I		T			I	I	T		1	1									
L	o/Cit	/Di	strict																																		
I OW																		•										!									
	1/011	אט (צ	SUICU																			•															

Nature of Business Tax Deduction Account No., if any RUSHABH INFOSOFT LTD.

Dat	e of c	omme	ncem	ent ((DD-	MM-	-YY	YY)																			1												
N	/lemb	Hindu ers/ Di OF P	rector	s (fo	or inf	orma	atio	n ab	oou	t mc	re	pers																				Pa	rtne	rs/					
(a)	No o	f Partn	ers/M	lemh	ners/	Dire	cto	rs						Ī																									
` '		ame (Ple	ase	Tic	k	as	an	nlic	abl	e							S	hri				Sn	nt			K	uma	ari	T			
. ,		ame/S			itiaio	Pioc	200	')	0	uoo		,,,,	uo	чР	Piic	abi	•		1	Firs	st Na	ame	9		····				<u> </u>					<u> </u>	<u> </u>				
																				T			<u> </u>													\top	\top		
Midd	le Nar	ne		I I				1 1											<u>L</u>						<u> </u>									1					
	ddres																																						
F	lat/Do	or/Blo	ck No).																								_											
_1	lame	of Pre	mises	/Bui	lding	J/Vill	age)																				_											
F	Road/S	Street/	Lane/	Post	t Offi	ice				1																													
P	\rea/L	ocality	<u>//Talul</u>	ka/S	ub-E	Divis	ion																																
Town	n/City/	Distric	t				- 1								- 1									-			_												
Sta	te/Un	ion Te	rritory				- 1								- 1									-			_					Pir)						
1		ull Naı					re	pres	ent	ativ	e as	sses	sse	e w	'nο	is a	ISSE	ess	able	ur	der	the	e Ind	com	e-t	ax /	4ct	n re	esp	ect	of t	he p	ers	on,					
		hose						40 /	- د ا				. 4	-4!-	N		4 4\																						
		een g e (exp								ase ase																Shri				0	mt.			K	mar	ri			
		ame/S			s pie	ase)		Г	160	15 C	HICH	`	as	aμμ	JIIC	abie	;				Firs	+ NI	om.	_	`	31111				3	IIIL.			Νu	IIIai	1			
L	asi in	ame/S	umai	iie																	rii S	LIN	ann	7															
Midd	le Nar	ne 			-	1	1	1 1		1	-		-	1			1	1		1		I	1	ı ı		1		1	-				1	1		_	П		_
L	\perp																																			Ш			
<i>F</i>	Addres	SS		1	-		I				-			1			1		1	1	1	I				ı	1		-				1	1		_		<u> </u>	\neg
	++	+	\perp	\sqcup	_	-				_	\perp	\perp	_	_		\perp	\perp		_	-	-	<u> </u>					_	_	_	_		_	_	-		$\vdash \vdash$	\dashv		4
F	·lat/Do	or/Blo	ock No	ο.																																			

					_		,				-												_	-		_								
Name of	of Pre	emis	es/Bu	uilding	g/Vil	lage	9						_	_																				
Road/St	reet/l	Lane	/Pos	t Offic	се																													
Area/Lo	cality	/Talı	ıka/S	ub-D	ivisi	on			1																									
Town/Ci	ity/Dis	strict		1		1		1	1									1																
State/U	Jnion	Terr	itory														l			l								Piı	n					Т
			,																								l	' ''			ļ	ı	ļ	ļ
(i) Perm	naner	nt Ac	coun	t Nun	nber	if a	anv	. all	otted	l ea	arlie	r [1			
GIR No.						,		,																							i			
Ward/C		-		a oan						1			1	- 1		<u> </u>			1	<u>_</u>			1	<u> </u>			1	1			1			
vvalu/C	II CIC/	Itali	y c						<u></u>				_!	l					1				_								_			
																										oplic	ant ovid	ed a	abo	ve)				
ify today	y, the	:	D	- D	N	/ 1	M	-	Υ	Υ	Υ	Υ	,																					
Permane Date of a								ıt		F	FOR	0	FFI	CE	US	E 																		
mber	anoun	ient (JI I 6	iiiiaii	GIII I	~ 00	ouri			[) I	D		М	M	1	١	Y '	Y	Υ	Υ													
olicable i	in pla	ices	notifi	ed by	the	Во	ard	unc	der s	ub-	sec	tior	n (4)) of	sec	tion	13	9A	of th	ne li	ncor	ne-	tax	Act	, 19	61.								