

SIGNATURES ON TOP OF THE PHOTO

(SAMPLE FORM FOR REFERENCE)

Form No. 49AA

Application for Allotment of Permanent Account Number
[Individuals not being a Citizen of India/Entities incorporated outside India/
Unincorporated entities formed outside India]

Under section 139A of the Income Tax act, 1961

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



Sign/ Left Thumb Impression across this photo



SIGNATURE 1

Signature/Left Thumb Impression

Assessing officer (AO code)

Area code	AO type	Range code	AO No.

(LEAVE THE ABOVE SECTION BLANK)

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/Mr Smt/Mrs Kumari/Ms M/s

Last Name / Surname CHOPRA
 First Name PRADEEP
 Middle Name KUMAR

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

PRADEEP CHOPRA

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/Mr Smt/Mrs Kumari/Ms M/s

Last Name / Surname
 First Name
 Middle Name

4 Gender (for individual applicants only) Male Female (Please tick as applicable)

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

Day 18 Month 03 Year 1969

6 Father's Name (Only 'Individual' applicants: Even married women should fill in father's name only)

Last Name / Surname CHOPRA
 First Name RAVI
 Middle Name KUMAR

7 Address

Residence Address

Flat/Room/ Door / Block No. 16
 Name of Premises/ Building/ Village REGENT COURT
 Road/Street/ Lane/Post Office OXFORD STREET
 Area / Locality / Taluka/ Sub- Division
 Town / City / District HARROW
 State / Union Territory MIDDLESEX Pincode / Zip code HA2 ORG Country Name UK

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
 State / Union Territory Pincode / Zip code Country Name

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

9 Telephone Number & Email ID details

Country code Area / STD Code Telephone / Mobile number

Email ID

10 Status of applicant

Please select status, as applicable

- Individual
- Hindu undivided family
- Company
- Partnership Firm
- Government
- Trusts
- Body of Individuals
- Local Authority
- Artificial Juridical Persons
- Association of Persons
- Limited Liability Partnership

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

12 Country of citizenship

ISD code of country of citizenship

13 Source of Income

Please select status, as applicable

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

14 Representative or Agent of the Applicant in India

Full name, address of the Representative or Agent

Full Name (Full expanded name: initials are not permitted)

Please select title, as applicable Shri/Mr Smt/Mrs Kumari/Ms M/s

Last Name / Surname

First Name

Middle Name

LEAVE THIS SECTION BLANK

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

14 Documents submitted as Proof of Identity(POI) and Proof of Address (POA)

I/We have enclosed as proof of identity, as proof of address, and as mandatory certified documents

[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]

15 KYC details* [To be filled in by Foreign Institutional Investor or a Qualified Foreign Investor, as prescribed under the regulations issued by the Securities and Exchange Board of India (SEBI)]

["Control" as defined under SEBI (Substantial Acquisition of Shares and Takeovers) Regulations, 1997
"Beneficial owner" as defined in the para 5.1 of SEBI circular on Anti Money Laundering.]

(a) In case of Individuals

Please select as applicable

- Marital Status Single Married Divorced Widow/Widower
- Citizenship Status Foreigner Person of Indian origin Overseas citizen of India

In case of foreigner, country of citizenship

- Private sector service
- Public sector/Govt. service
- Business
- Professional
- Agriculturist
- Retired
- Housewife
- Student
- Others

(b) In case of non individuals

Please select as applicable

R Private Company

U Public Company

D Body Corporate

S Financial Institution

N Non Government Organization

C Charitable Organization

(c) Gross Annual Income - INR

Netwoth (Assets less liabilities) in INR

[Empty box for Gross Annual Income]

(d) In case of a Public Company, whether listed on a stock exchange

Yes

No

Please select as applicable

If yes, then indicate name of the stock exchange

[Empty box for stock exchange name]

(e) In case of Non-individuals

Does it have few persons or persons of the same family holding beneficial ownership and control.

Yes

No

Please select as applicable

["Control": Control shall include the right to appoint majority of the directors or to control the management or policy decisions exercisable by a person or persons acting individually or in concert, directly or indirectly, including by virtue of their shareholding or management rights or shareholders agreements or voting agreements or in any other manner

"Beneficial owner" means the natural person who ultimately owns or controls the applicant and/or the person on whose behalf a transaction is being conducted, and includes a person who exercises ultimate effective control over a juridical person]

(f) Is the entity involved / providing any of the following services

Please select as applicable

Foreign exchange, Money Changer Services

Yes

No

Gaming/Gambling/Lottery services (Casinos and Betting Syndicates)

Yes

No

Money Lending, Pawning

Yes

No

(g) Whether the applicant or the applicant's authorised signatories/trustees/office bearers is

(i) a politically exposed person

Yes

No

(ii) related to a politically exposed person

Yes

No

[For definition of politically exposed person refer to guidelines issued under the Prevention of Money Laundering Act (PMLA)]

(h) Taxpayer Identification Number in the country of residence

[Empty box for Taxpayer Identification Number]

(ABOVE NOT HANODATORY)

17 I/We PRADDEEPKCHOPRA, the applicant, in the capacity of

INDIVIDUAL

do hereby declare that what is stated above is true to the best of my/our information and belief.

Place

LONDON

Date

D D M M Y Y Y Y
01022000

SIGNATURE - 2

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