

## Request For Changes Or Correction in PAN Data [For Non-Individual]

Permanent Account Number (PAN)								

[illegible]

Sr. No.	Tick Box	Part A - Personal Information
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[illegible]

**2. .**  Tick **Date of Incorporation/Agreement/Partnership or Trust Deed/Formation of Body of Individuals or Association of Persons**

d	d	m	m	y	y	y	y
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3.	Tick	Office Address
Flat/Door/Building		
Road/Street/Block/Sector		
Post Office		
Area/Locality/Town/City		
District		
State/Union Territory		
Country/Region		
PIN / ZIP CODE		

[illegible][illegible]

### PART B- Declaration by Applicant

**6. Documents submitted as Proof of Identity, Proof of Address, Proof of Date of Incorporation/Agreement/Partnership or Trust Deed/Formation of Body of Individuals or Association of Persons of the Applicant**

<input type="checkbox"/> (i) Proof of Identity	<input type="checkbox"/> (iii) Proof of Address
<input type="checkbox"/> (ii) Proof of Date of Incorporation/Agreement/Partnership or Trust Deed/Formation of Body of Individuals or Association of Persons	<input type="checkbox"/> (iv) Proof of PAN

### Verification & Declaration

a. I, \_\_\_\_\_, in the capacity of \_\_\_\_\_ do hereby declare that what is stated above is true to the best of my knowledge and belief.

Designation.....

Place.....

Date.....

\_\_\_\_\_

(Signature /Left Hand Thumb Impression of Applicant or Representative  
Assessee or Authorized Representative)

# GUIDELINES FOR FILLING REQUEST FOR CHANGES OR CORRECTION IN PAN DATA

(For NON-INDIVIDUAL)

- Form to be filled legibly in **BLOCK LETTERS** and preferably in **BLACK INK**. **Form should be filled in English only**
- Mention your PAN correctly. Applicant to provide copy of PAN card with this form. In case of loss of PAN card, a copy of FIR to be submitted along with this form.
- Registration Number is mandatory for Company and Limited Liability Partnership.
- Each box, wherever provided, should contain only one character (alphabet /number / punctuation sign) leaving a blank box after each word.
- Signature /Left hand thumb impression should be **within the box** provided at the bottom right side of the form.
- Thumb impression, if used, should be attested by a Magistrate or a Notary Public or an Oath Commissioner or a Gazetted Officer under official seal and stamp.
- For reprint of PAN card without any changes-** PAN holders may visit any of the following websites:
  - www.utiitsl.com
  - www.tinpan.proteantech.in
- For changes or correction in PAN data,** tick box on the left margin of appropriate S. No. where change/correction is required and fill that field along with the other mandatory fields in the form.

S. No.	Part A: Personal Information																																																																																																																																																				
1	Name	<p>Non-Individuals should write their full name starting from the first block. If the name is longer, it can be continued in the space provided.</p> <p>a) For example, XYZ DATA CORPORATION (INDIA) PRIVATE LIMITED should be written as:</p> <table border="1"> <tr> <td>X</td><td>Y</td><td>Z</td><td></td><td>D</td><td>A</td><td>T</td><td>A</td><td></td><td>C</td><td>O</td><td>R</td><td>P</td><td>O</td><td>R</td><td>A</td><td>T</td><td>I</td><td>O</td><td>N</td><td></td><td>(</td><td>I</td><td>N</td><td>D</td> </tr> <tr> <td>I</td><td>A</td><td>)</td><td></td><td>P</td><td>R</td><td>I</td><td>V</td><td>A</td><td>T</td><td>E</td><td></td><td>L</td><td>I</td><td>M</td><td>I</td><td>T</td><td>E</td><td>D</td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> <p>b) For example, MANOJ MAFATLAL DAVE HUF should be written as:</p> <table border="1"> <tr> <td>M</td><td>A</td><td>N</td><td>O</td><td>J</td><td></td><td>M</td><td>A</td><td>F</td><td>A</td><td>T</td><td>L</td><td>A</td><td>L</td><td></td><td>D</td><td>A</td><td>V</td><td>E</td><td></td><td>H</td><td>U</td><td>F</td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> <p>(i) It is a mandatory field.                      (ii) In Case of Company, the name should be provided without any abbreviations. For example, different variations of "Private Limited" viz. Pvt Ltd, Private Ltd, Pvt Limited, P. Ltd., P. Ltd., P Ltd. are <b>not</b> allowed. It should be written as Private Limited.                      (iii) Name should <b>not</b> be prefixed with any title such as M/s etc.</p>	X	Y	Z		D	A	T	A		C	O	R	P	O	R	A	T	I	O	N		(	I	N	D	I	A	)		P	R	I	V	A	T	E		L	I	M	I	T	E	D																															M	A	N	O	J		M	A	F	A	T	L	A	L		D	A	V	E		H	U	F																																																		
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2	Date of (Incorporation /Agreement /Partnership or Trust Deed/ Formation of Body of Individuals or Association of Persons)	<p>(i) It is a mandatory field.                      (ii) Date cannot be a future date. Date: 2nd August 1975 should be written as:</p> <table border="1"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td>0</td><td>8</td><td>1</td><td>9</td><td>7</td><td>5</td> </tr> </table> <p>(iii) Relevant date for different categories of applicants is:                      Company: Date of Incorporation; Association of Persons: Date of formation/creation;                      Trusts: Date of creation of Trust Deed; Partnership Firms: Date of Partnership Deed;                      LLPs: Date of Incorporation/registration; HUFs: Date of creation of HUF.</p>	D	D	M	M	Y	Y	Y	Y	0	2	0	8	1	9	7	5																																																																																																																																			
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3	Office Address	<p>(i) It is mandatory to fill complete office address.                      (ii) It is mandatory to provide Country Name and ZIP Code, if a foreign address is provided.</p>																																																																																																																																																			
4	Taxpayer Identification Number (TIN) in the Country of Residence	It is mandatory to provide TIN for an entity incorporated outside India/an Unincorporated Entity formed outside India.																																																																																																																																																			
5	Contact Details	<p>a) It is mandatory for the applicants to mention their "Mobile Number and "e-mail id".                      b) Mobile Number should include Country Code (ISD Code) and Landline Number (if any) should include Country/ISD Code and Area/STD Code.                      (i) Mobile Number 9102511111 of India should be written as:</p> <table border="1"> <tr> <td colspan="3">Country Code</td> <td colspan="10">Mobile Number</td> </tr> <tr> <td></td><td>9</td><td>1</td> <td></td><td>9</td><td>1</td><td>0</td><td>2</td><td>5</td><td>1</td><td>1</td><td>1</td><td>1</td><td>1</td> </tr> </table> <p>Where '91' is the Country Code of India.</p> <p>(ii) Email ID: -  <input type="text"/></p> <p>(iii) Landline Number 011 23555705 of Delhi, India should be written as:</p> <table border="1"> <tr> <td colspan="3">Country/ISD Code</td> <td colspan="3">Area/STD Code</td> <td colspan="7">Landline Number</td> </tr> <tr> <td></td><td>9</td><td>1</td> <td></td><td>1</td><td>1</td> <td></td><td>2</td><td>3</td><td>5</td><td>5</td><td>5</td><td>7</td><td>0</td><td>5</td> </tr> </table> <p>Where '91' is the ISD Code and '11' is the STD Code of Delhi, India.</p>	Country Code			Mobile Number											9	1		9	1	0	2	5	1	1	1	1	1	Country/ISD Code			Area/STD Code			Landline Number								9	1		1	1		2	3	5	5	5	7	0	5																																																																																												
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