

PAN CR-01

Request For Changes Or Correction in PAN Data  
[For an Individual]



Permanent Account Number (PAN)  
D A R P N 6 0 9 5 Q

Aadhaar Number  
7 8 0 4 7 0 4 4 6 5 0 9

Sr. No. Tick Box **PART A - Personal Information**

1.  **A. Name**

First Name

Middle Name

Last Name

**B. Name (as per Aadhaar)**

2.  **Gender (select one)**  Male  Female  Transgender

3.  **Date of Birth**

4.  **Address**

Residence  Office (select one)

Flat/Door/Building

Road/Street/Block/Sector

Post Office

Area/Locality/Town/City

District

State/Union Territory  Country/Region  PIN / ZIP CODE

5.  **Passport Number**

6.  **Taxpayer Identification Number in the Country of Residence**

7.  **Contact Details**

(i) Mobile Number Country Code  Mobile Number

(ii) Email ID

(iii) Landline No. with Country/ISD Code Country/ISD Code  Area/STD Code

and Area/STD Code (if any) Landline Number

**PART B - Details of Parents**

8.  **Father's First Name**

Father's Middle Name

Father's Last Name

9.  **Mother's First Name**

Mother's Middle Name

Mother's Last Name

10. **Name of parent to be printed on Permanent Account Number card (select one)**  Father  Mother

**Part C: Declaration by Applicant or by Representative Assessee on behalf of the Applicant**

11. **Documents submitted as Proof of Identity, Proof of Address, Proof of Date of Birth of the Applicant & Proof of Change in support of proposed changes / corrections requested by the Applicant**

(i) Proof of Identity  (ii) Proof of Address  (iii) Proof of Date of Birth

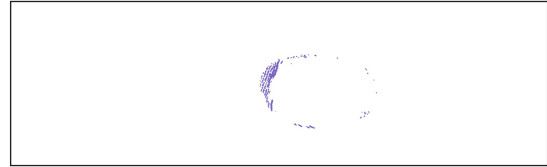
(iv) Documentay proof in support of other changes  (v) Copy of PAN

**Verification & Declaration**

a. I, ...**NARASAMMA**....., in the capacity of .....**SELF**.....(Self/Representative Assessee) do hereby declare that what is stated above is true to the best of my knowledge and belief.

Place.....**CHIKKABALLAPUR**

Date.....**15/06/2026**



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

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File: existing\_pan\_card.pdf