



FORM NO. 93

[See rule 158]

Application for Allotment of Permanent Account Number
[For an Individual being a Citizen of India]

Sr. No.

PART A - Personal Information

1. A. Name

First Name

U

M

A

Middle Name

B

E

L

U

R

Last Name

L

O

H

I

T

H

A

C

H

A

R

I

B. Name (as per Aadhaar)

U

M

A

B

L

2. Gender (select one)

☐

Male

☒

Female

☐

Transgender

3. Date of Birth

0

3

0

9

2

0

0

7

4. Aadhaar Number

9

8

8

3

1

0

3

3

7

0

0

7

5. Residence Address

Flat/Door/Building

1

2

1

Road/Street/Block/Sector

H

A

L

A

S

U

L

I

G

E

Post Office

H

A

L

A

S

U

L

I

G

E

Area/Locality/Town/City

S

A

K

L

E

S

H

P

U

R

District

H

A

S

S

A

N

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5

7

3

1

2

7

6. Office Address

Flat/Door/Building

Road/Street/Block/Sector

Post Office

Area/Locality/Town/City

District

State/Union Territory

Country/Region

PIN / ZIP CODE

7. Residential Status (select one as applicable)

☒

Resident

☐

Non Resident

☐

Resident but Not ordinarily Resident

8. Passport Number (mandatory for (i) Non Resident (ii) Resident but not ordinarily resident)

9. Taxpayer Identification Number (TIN) in the Country of Residence (if any)

10. Contact Details

(i) Mobile Number

Country Code

9

1

Mobile Number

8

0

8

8

1

2

0

1

9

1

(ii) Email ID

manvithmanvi946@gmail.com

(iii) Landline No. with STD Code (if any) STD Code

Landline Number

PART B- Source of Income

11. Source of Income
(select one or more)

☐

Salary

☐

Income from Business/Profession

☐

Income from House Property

☐

Capital Gains

☒

Income from Other Sources

☐

No Income

PART C - Details of Parents

12. Whether mother/father is a single parent? (select one)

☐

Yes

☒

No

13. Father's First Name

Father's Middle Name

Father's Last Name

L

O

H

I

T

H

A

C

H

A

R

I

15. Name of parent to be printed on Permanent Account Number card (select one) ☒ Father ☐ Mother

16. Assessing Officer (AO Code)	(i) Area Code	K	A	R	(ii) AO Type	W	
	(iii) Range Code	3	2	1	(iv) AO No.	9	2

[illegible][illegible]

20. Representative Assessee Address	
Flat/Door/Building	
Road/Street/Block/Sector	
Post Office	
Area/Locality/Town/City	
District	
State/Union Territory	Country/Region PIN / ZIP CODE

21. Contact Details

[illegible]

22. Address for Communication (select one) ☒ Residence Address ☐ Representative Assessee Address ☐ Office Address

23. Documents submitted as Proof of Identity, Proof of Address and Proof of Date of Birth of the Applicant

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

24. Documents submitted as Proof of Identity, Proof of Address of Representative Assessee

Tick (i) Proof of Identity Tick (ii) Proof of Address

UMA B L

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

b. I declare that the applicant does not possess Permanent Account Number and shall be liable for legal consequences under Income-Tax Act, 2025 if this
declaration is found to be incorrect

Place. HASSAN

Date. 20/06/2026

Unit BL

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

Name: UMA B L

Designation: **AUTHORIZED PERSON**



ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ Enrolment No.: 0707/10033/05422

To
ಉಮಾ ಬಿ ಎಲ್
Uma B L
D/O: Lohitha Chari,
Shankaradevara pete,
VTC: Belur,
PO: Belur Hassan,
Sub District: Belur,
District: Hasan,
State: Karnataka,
PIN Code: 573115,
Mobile: 8904660336

Signature valid

ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

9883 1033 7007

VID : 9183 7697 8270 0053

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India

Aadhaar no. issued: 20/09/2007



ಉಮಾ ಬಿ ಎಲ್
Uma B L
ಜನನ ದಿನಾಂಕ DOB: 08/09/2007
FEMALE

ಆಧಾರ್ ಗುರುತಿನ ಪುರಾವೆಯಾಗಿದೆ, ಪೌರತ್ವ ಅಥವಾ ಜನ್ಮ ದಿನಾಂಕದ ಪುರಾವೆ
ಇಲ್ಲ. ಇದನ್ನು ಆಧಾರ್‌ನಲ್ಲಿ ನೋಂದಿಸಿದ ಅಧಾರ್ ಹಾಲ್ಡರ್ / ಆಧಾರ್‌ನಲ್ಲಿ ಇದ್ದ
ಇನ್-ವಿಡಿಯೋದೊಂದಿಗೆ ಮಾತ್ರ ಬಳಸಬೇಕು.

Aadhaar is proof of identity, not of citizenship or date of
birth. It should be used only with verification (online
authentication or scanning of QR code / offline XML.)

9883 1033 7007

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಕರ್ನಾಟಕ ಸರ್ಕಾರ
GOVERNMENT OF KARNATAKA



ಕರ್ನಾಟಕ ಶಾಲಾ ಪರೀಕ್ಷೆ ಮತ್ತು ಮೌಲ್ಯನಿರ್ಣಯ ಮಂಡಳಿ, ಬೆಂಗಳೂರು
Karnataka School Examination and Assessment Board, Bengaluru
ಅಂಕಪಟ್ಟಿ ಹಾಗೂ ಪ್ರಮಾಣ ಪತ್ರ / Marks Statement cum Certificate

This is to certify that the below mentioned candidate has passed S.S.L.C. Examination.

ગુણ/ **GIRL**
Gender :

ಅಧ್ಯಕ್ಷರು
Chairman

23340175