



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

H O S A H A L L I

Middle Name

T H A M M E G O W D A

Last Name

P U N E E T H

B. Name (as per Aadhaar)

H T P U N E E T H

2. Gender (select one)



Male



Female



Transgender

3. Date of Birth

0

7

1

2

2

0

0

4

4. Aadhaar Number

6

1

4

9

9

6

5

9

7

9

8

9

5. Residence Address

Flat/Door/Building

K H O S A H A L L I

Road/Street/Block/Sector

D U D D A H O B A L I , H A S S A N T A L

Post Office

H A L E K O P P A L U

Area/Locality/Town/City

H A S S A N

District

H A S S A N

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5

7

3

2

1

9

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

9

5

9

1

0

7

1

5

5

8

(ii) Email ID

colorsnetzone@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

T H A M M E

Father's Middle Name

Father's Last Name

G O W D A

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

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

[illegible]

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

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

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

SELF

a. I, _____, in the capacity of _____ (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 27/06/2026



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

Name: H T PUNEETH

Designation: **AUTHORIZED PERSON**



ಭಾರತ ಸರ್ಕಾರ
Government of India

Aadhaar no. issued: 16/11/2013



ಹೆಚ್ ಟಿ ಪುನೀತ್

H T Puneeth

ಜನ್ಮ ದಿನಾಂಕ/DOB: 07/12/2004

ಪುರುಷ/ MALE

ಆಧಾರ್ ಗುರುತಿನ ಪುರಾವೆಯಾಗಿದೆ, ಪೌರತ್ವ ಅಥವಾ ಜನ್ಮ ದಿನಾಂಕದ ಪುರಾವೆ ಅಲ್ಲ. ಇದನ್ನು ಆನ್‌ಲೈನ್ ದೃಢೀಕರಣ ಅಥವಾ QR ಕೋಡ್ / ಆಫ್‌ಲೈನ್ XML ಸ್ಕ್ಯಾನಿಂಗ್‌ನೊಂದಿಗೆ 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)

6149 9659 7989

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India



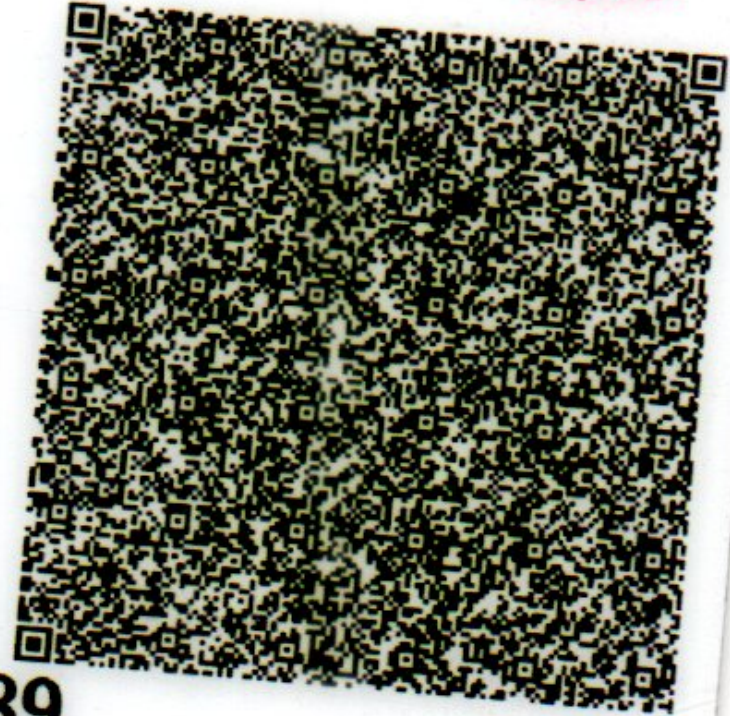
Details as on: 19/08/2025

ವಿಳಾಸ:

S/O: ತಮ್ಮೇಗೌಡ, ದುದ್ದ ಹೋಬಳಿ, ಹಾಸನ ತಾಲ್ಲೂಕು,
ಕೆ.ಹೊಸಹಳ್ಳಿ, ಸಾಲಗಾಮೆ, ಹಾಸನ,
ಕರ್ನಾಟಕ - 573219

Address:

S/O: Thammegowda, Dudda Hobali, Hassan Talluk,
K.Hosahalli, PO: Salagame, DIST: Hasan,
Karnataka - 573219



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VID : 9171 4487 4294 7713

☎ 1947

✉ help@uidai.gov.in

🌐 www.uidai.gov.in



ಕರ್ನಾಟಕ ಸರ್ಕಾರ
GOVERNMENT OF KARNATAKA

Karnataka Secondary Education Examination Board

ಈ ಕೆಳಗೆ ಕಾಮಗಾರಿಗಳ ಆಯ್ಕೆ ವಿವರಿಸಿ: ಎಸ್. ಎಸ್. ಎಸ್. ೩. ಪರಿಶೀಲಿಸಿ, ತೀರ್ಮಾನಿಸಿ, ತೀರ್ಮಾನಿಸಿ, ತೀರ್ಮಾನಿಸಿ.

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



109824567

Series - staff / Month - Year : JULY-2021

ಅಭ್ಯರ್ಥಿ ವಿಧ / Candidate Type : CCE REGULAR FRESH

ತಾಯಿಯ ಹೆಸರು / Mother's Name : SHANTHA

Self / Gender: BOY

ਭਾਗ - ੨ / PART - A

ಗಳಿಸಿದ ಒಟ್ಟು ಅಂಕಗಳು (ಅಕ್ಷರಗಳಲ್ಲಿ) / **FOUR HUNDRED SEVEN** (65.12%)
TOTAL MARKS OBTAINED (IN WORDS):

પ્રકાર - ૩ / PART - B

KSEBB KSEBB KSEBB KSEEB KSEEB KSEEB KSEEB KSEEB KSEEB KSEEB KSEEB KSEEB KSEEB KSEEB KSEEB

AYANAGAR, HASSAN, HASSAN DISTRICT

05/ DATE : 09.08.2021

Ex. 1 1

W00DF00F

ಕರ್ನಾಟಕ ಪ್ರೌಢ ಶಿಕ್ಷಣ ಪರಿಷತ್, ಮಂಡಲ, ಬೆಂಗಳೂರು

SECRETARY

KARNATAKA SECONDARY EDUCATION EXAMINATION BOARD,
BENGALURU