



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

S A V I T A

Middle Name

D E V A P P A

Last Name

P U J A R

B. Name (as per Aadhaar)

S A V I T A

D E V A P P A

P U J A R

2. Gender (select one)

Tick

Male

Tick

Female

Tick

Transgender

3. Date of Birth

2

6

1

0

2

0

0

6

4. Aadhaar Number

8

9

9

6

3

7

8

0

6

0

9

1

5. Residence Address

Flat/Door/Building

N E A R

G U N D A L I N G E S H W A R

P L O

Road/Street/Block/Sector

G U D I S A G A R

Post Office

G U D I S A G A R

Area/Locality/Town/City

G U D I S A G A R

District

D H A R W A D

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5 8 2 2 0 8

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)

Tick

Resident

Tick

Non Resident

Tick

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

7

0

2

6

2

5

9

8

1

1

(ii) Email ID

mallusagar.ur@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)

Tick

Salary

Tick

Income from Business/Profession

Tick

Income from House Property

Tick

Capital Gains

Tick

Income from Other Sources

Tick

No Income

PART C - Details of Parents

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

Tick

Yes

Tick

No

13. Father's First Name

M A L L A P P A

Father's Middle Name

Father's Last Name

K O N D 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]

19. Aadhaar Number (if Permanent Account Number is not available) [][][][][][][][][][][][]

20. Representative Assessee Address

Flat/Door/Bldg																								
Road/Street/Block/Sector																								
Post Office																								
Area/Locality/Town/City																								
District																								
State/Union Territory																								
Country/Region														PIN / ZIP CODE										

21. Contact Details

(i) Mobile Number		Country Code		Mobile Number	
(ii) Email ID					
(iii) Landline No. with STD Code (<i>if any</i>)		STD Code		Landline Number	

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

SAVITA DEVAPPA PILLAI

SAVITA DEVAPPA PUJAR

a. I,, 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.

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. **DHARWAD**

Date. **29/06/2026**

ಪ್ರಯಾ

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

Name: SAVITA DEVAPPA PUJAR

Designation: **AUTHORIZED PERSON**



ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ/ Enrolment No.: S132/18844/96210

To

ಸವಿತಾ ದೇವಪ್ಪ ಪೂಜಾರ

Savita Devappa Pujar

C/O: Devappa Kariyallappa Pujar,

Ward No 2,

#69,

Near Gundulngeshwar Plot,

Taluka Navalgund,

VTC: Gudisagar,

PO: Gudisagar,

Sub District: Navalgund,

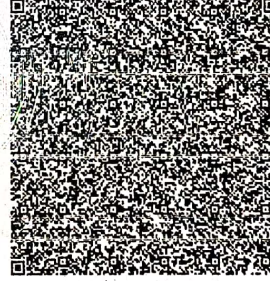
District: Dharwad,

State: Karnataka,

PIN Code: 582208

Signature No: 7026259811

Digitally signed by Unique
Identification Authority of India
06
Date: 2026.06.10 17:23:35
IST



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

8996 3780 6091

VID : 9187 0209 7143 0610



ಭಾರತ ಸರ್ಕಾರ
Government of India

Aadhaar no. issued: 10/04/2016



ಸವಿತಾ ದೇವಪ್ಪ ಪೂಜಾರ

Savita Devappa Pujar

ಜನ್ಮ ದಿನಾಂಕ/DOB: 26/10/2006

ಸ್ತ್ರೀ/ FEMALE

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)

8996 3780 6091

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



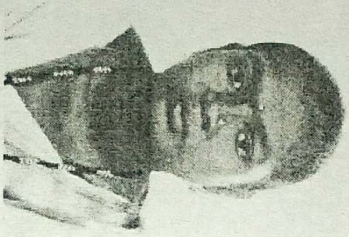
Scanned with OKEN Scanner



**National
Health
Authority**

Ayushman Bharat Health Account (ABHA)

आयुष्मान भारत स्वास्थ्य खाता (आभा)



Name/ ಹೆಸರು

Savita Devappa Pujar

ಸವಿತಾ ದೇವಪ್ಪ ಪೂಜಾರ

Abha Number/ ಅಭಾ ಸಂಖ್ಯೆ

91-3425-6654-2680

Abha Address/ ಅಭಾ ವಿಳಾಸ

savitapujar262006@abdm



Gender/ ಲಿಂಗ
Female / ಹೆಣ್ಣು

Date Of Birth/ ಹುಟ್ಟಿದ ದಿನಾಂಕ
26-10-2006

Mobile/ ಮೊಬೈಲ್
7026259811



**National
Health
Authority**

Ayushman Bharat Health Account (ABHA)

आयुष्मान भारत स्वास्थ्य खाता (आभा)

