

**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

N A M R A T H A

Middle Name

M A V I N A K E R E

Last Name

A N A N D A K U M A R

B. Name (as per Aadhaar)

N A M R A T H A M A

2. Gender (select one)☐ Tick

Male

☒ Tick

Female

☐ Tick

Transgender

3. Date of Birth

2 0 0 5 2 0 0 8

4. Aadhaar Number

9 4 1 4 0 1 0 1 1 4 4 7

5. Residence Address

Flat/Door/Building

K A M A D H E N U N I L A Y A

Road/Street/Block/Sector

C H I K A H O N E N A H A L L I , V I D Y A N

Post Office

V I D Y A N A G A R P O S T

Area/Locality/Town/City

V I D Y A N A G A R (H A S S A N)

District

H A S S A N

State/Union Territory

K A R N A T A K A

Country/Region

I N D I A

PIN / ZIP CODE

5 7 3 2 0 2

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

8 3 1 0 1 3 7 2 7 4

(ii) Email ID

smksevakendra@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

A N A N D A

Father's Middle Name

Father's Last Name

K U M A R

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]

21. Contact Details									
(i) Mobile Number	Country Code				Mobile Number				
(ii) Email ID									
(iii) Landline No. with STD Code (if any)	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 and Representative Assessee

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

2 of 5



सत्यमेव जयते
भारत सरकार



ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ/ Enrolment No.: 0690/10064/00389

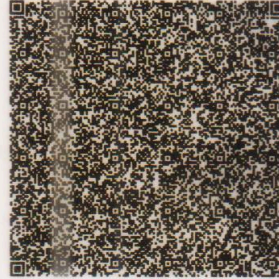
Download Date: 04/07/2021

To
ನಮ್ರತ ಎಂ ಎ
Namratha M A
C/O: Dr Ananda Kumar
Kamadhenu Nilaya
Chikahonenahalli
Vidyanagara
Vidyanagara 2nd Stage
Vidyanagar (Hassan)
Vidyanagar (hassan)
Hassan Kamataka - 573202
8310137274

Issue Date: 22/12/2020

Signature valid

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UNIQUE IDENTIFICATION
AUTHORITY OF INDIA DS
Date: 2021.07.04 20:46:29
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ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

9414 0101 1447

VID : 9123 7035 8227 5694

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ಭಾರತ ಸರ್ಕಾರ
Government of India

Download Date: 04/07/2021



ನಮ್ರತ ಎಂ ಎ
Namratha M A
ಜನ್ಮ ದಿನಾಂಕ/DOB: 20/05/2008
ಶ್ರೀ FEMALE

Issue Date: 22/12/2020

9414 0101 1447

VID : 9123 7035 8227 5694

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ಅಧ್ಯಕ್ಷರು
Chairperson