

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

D E E P A K

Middle Name

G O W D A

Last Name

D H A R M A P P A

B. Name (as per Aadhaar)

D E E P A K G O W D A D

2. Gender (select one)



Male



Female



Transgender

3. Date of Birth

2 4 0 1 2 0 0 8

4. Aadhaar Number

2 3 1 5 7 1 6 4 7 4 5 4

5. Residence Address

Flat/Door/Building

A L A D A H A L L I K O P P A L U

Road/Street/Block/Sector

S A L A G A M E H O B L I

Post Office

A L A D A H A L L I K O P P A L U

Area/Locality/Town/City

A L A D A H A L L I

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

7 0 1 9 5 7 5 2 0 3

(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)



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

D H A R M A P P A

Father's Middle Name

Father's Last Name

R A N G E 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

[illegible]

18. Permanent Account Number (if any)

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[illegible]

20. Representative Assessee Address

[illegible]

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

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

DEEPAK GOWDA D

a. I, DEEPAK GOWDA D, 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.HASSAN

Date...10/07/2026

SELF

(Self/ Representative Assessee) do hereby declare that

able for legal consequences under Income-Tax Act, 2025 if this

Deepak.

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

Name: DEEPAK GOWDA D

Designation: **AUTHORIZED PERSON**



ಭಾರತ ಸರ್ಕಾರ
Government of India

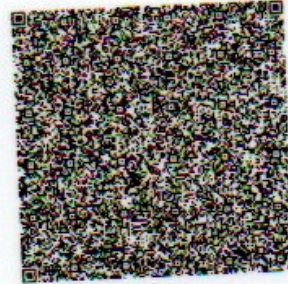
ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ/ Enrolment No.: 0221/00435/00767

To
ದೀಪಕ್ ಗೌಡ ಡಿ
Deepak Gowda D
S/O: Dharmappa R
hassan taluk
salagame hobli
aladahallikoppalu
Aladahalli
Hasan Karnataka - 573219
9480783030

Signature valid

Digital Signature
UNIQUE IDENTIFICATION
AUTHORITY OF INDIA
Date: 2023-08-14 14:22:15
UTC



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

2315 7164 7454

VID : 9132 7690 9866 9880

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ಭಾರತ ಸರ್ಕಾರ
Government of India



ದೀಪಕ್ ಗೌಡ ಡಿ
Deepak Gowda D
ಜನ್ಮ ದಿನಾಂಕ/DOB: 24/01/2008
ಪುರುಷ/ MALE

Issue Date: 13/07/2013

2315 7164 7454

VID : 9132 7690 9866 9880

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0911027

रजि. नं.
Regn.No.

K124/45285/0015

केन्द्रीय माध्यमिक शिक्षा बोर्ड
CENTRAL BOARD OF SECONDARY EDUCATION

अंक विवरणिका सह प्रमाण पत्र
MARKS STATEMENT CUM CERTIFICATE

माध्यमिक विद्यालय परीक्षा, 2024
SECONDARY SCHOOL EXAMINATION, 2024



यह प्रमाणित किया जाता है कि

This is to certify that DEEPAK GOWDA D

अनुक्रमांक

Roll No. 18165040

माता का नाम

Mother's Name VASANTHAKUMARI M K

पिता/संरक्षक का नाम

Father's / Guardian's Name DHARMAPPA R .

जन्म तिथि

Date of Birth 24-01-2008 24TH JANUARY TWO THOUSAND EIGHT

विद्यालय

School 45285-CHRIST SCHOOL VIDYA NAGAR HASSAN KARNATAKA

की शैक्षणिक उपलब्धियां निम्नानुसार हैं has achieved Scholastic Achievements as under :

विषय कोड SUB. CODE	विषय SUBJECT	प्राप्तांक MARKS OBTAINED				स्थितिय ग्रेड POSITIONAL GRADE
		लिखित THEORY	आ. मू. IA/ प्र. प्र.	योग TOTAL	योग (शब्दों में) TOTAL (IN WORDS)	
184	ENGLISH LNG & LIT.	056	020	076	SEVENTY SIX	B2
015	KANNADA	066	020	086	EIGHTY SIX	B2
041	MATHEMATICS STANDARD	035	020	055	FIFTY FIVE	C1
086	SCIENCE	035	020	055	FIFTY FIVE	C1
087	SOCIAL SCIENCE	055	020	075	SEVENTY FIVE	B2

परिणाम Result PASS

दिल्ली Delhi

दिनांक Dated : 13-05-2024

परीक्षा नियंत्रक

Controller of Examinations

साह-शैक्षणिक उपलब्धियां : साह-शैक्षणिक एवं अनुशासन क्षेत्र में ग्रेडिंग विद्यालय द्वारा अपने स्तर पर बोर्ड द्वारा जारी प्राक्तननुसार प्रदान की जाती है।

Co-Scholastic achievements : Grading for Co-Scholastic and Discipline area is being issued by the school as per format prescribed by the Board.