

**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

Middle Name

Last Name

B O R A M M A

B. Name (as per Aadhaar)

B O R A M M A

2. Gender (select one)☐ Tick

Male

☒ Tick

Female

☐ Tick

Transgender

3. Date of Birth

0 1

0 1

1 9 9 6

4. Aadhaar Number

9 7 5 6 9 7 1 7 3 0 7 9

5. Residence Address

Flat/Door/Building

4 / 6 5 P O L I C E S T A T I O N R O A D

Road/Street/Block/Sector

K E M B H A V I

Post Office

K E M B H A V I

Area/Locality/Town/City

T Q S H O R A P U R

District

Y A D G I R

State/Union Territory

K A R A N A T A K A

Country/Region

I N D I A

PIN / ZIP CODE

5 8 5 2 1 6

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 6 7 6 8 8 6 5 7 5

(ii) Email ID

utireddy@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

Father's Middle Name

Father's Last Name

M A L L A P P 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	4	2	1	(iv) AO No.	5	

[illegible][illegible][illegible][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
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24. Documents submitted as Proof of Identity, Proof of Address of Rep

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

Date 12/07/2026

ਚੜ੍ਹਦੇਰੀ

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

Name: **BORAMMA**

Designation: **AUTHORIZED PERSON**



ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ

ಭಾರತ ಸರ್ಕಾರ

Unique Identification Authority of India
Government of India

ನೋಂದಾವಣೆ ಕ್ರಮ ಸಂಖ್ಯೆ / Enrollment No.: 0821/90251/03455

06/07/2015

To
Boramma
ಬೋರಮ್ಮ
W/O: Parashuram
4/65
police station road
tippu sultan chowk
kembhavi
Kembhavi
Kembhavi, Yadgir
Karnataka - 585216
9008955585



KH481091645FT

48109164



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

9756 9717 3079

ಆಧಾರ್ - ಶ್ರೀಸಾಮಾನ್ಯನ ಅಧಿಕಾರ



ಭಾರತ ಸರ್ಕಾರ

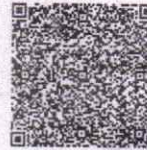
Government of India

ಬೋರಮ್ಮ
Boramma



ಜನ್ಮ ದಿನಾಂಕ / DOB: 01/01/1996
ಸ್ತ್ರೀ / Female

9756 9717 3079



ಆಧಾರ್ - ಶ್ರೀಸಾಮಾನ್ಯನ ಅಧಿಕಾರ



ಭಾರತ ಚುನಾವಣಾ ಆಯೋಗ
ಗುರುತಿನ ಚೀಟಿ
**ELECTION COMMISSION OF INDIA
IDENTITY CARD**

YSG2604205



ಮತದಾರರ ಹೆಸರು : ಬೋರಮ್ಮ
Elector's Name : Boramma
ಗಂಡನ ಹೆಸರು : ಮಲಪ್ಪ
Husband's Name : Malappa
ಲಿಂಗ / Sex : ಮಹಿಳೆ / Female
ಜನ್ಮ ದಿನಾಂಕ / Date of Birth : 01/01/1996

YSG2604205

ವಿಳಾಸ : 76. ಕೆಂಬಾವಿ
ಕೆಂಬಾವಿ
ಶೋರಪುರ
ಗುಲ್ಬರ್ಗಾ - 585216
76, Kembhavi
Kembhavi
Shorapur
Address : GULBARGA - 585216

Boramma

Date : 07/05/2008

37, ಶಾಹಪುರ ವಿಧಾನಸಭಾ ಕ್ಷೇತ್ರದ
ಚುನಾವಣಾ ನೋಂದಣಾಧಿಕಾರಿ / ಚುನಾವ ಆಯಾಚಾರಿ ಕಛೇರಿ
ಶಾಹಪುರ ವಿಧಾನಸಭಾ ಕ್ಷೇತ್ರ

Facsimile Signature of
Electoral Registration Officer
37, Shahpur Assembly Constituency

ವಿಳಾಸ ಬದಲಾಯಿಸಿದಲ್ಲಿ, ಗುರುತಿನ ಚೀಟಿಯ ವಿವರಗಡೆ ಬದಲಾವಣೆಯನ್ನು ಪಡೆದ ಜೇಳೆರದ ಬರುದಿನಯನು, ಹುನಾವಣಾ ಹೋದಣಿ ಲದಣತೆರದುಣಿಗ ವಿಧಾಪುಡೆಣಿ ರಡುಡೆಗೆಯ.

In case of change in address, mention this Card No. in the relevant office and obtain a new card. You must return this card to the office where you have enrolled in the case ceases to be valid due to change of address or otherwise.