# 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 | AGASARA |
| Middle Name | |
| Last Name | MANJUNATH |

**B. Name** *(as per Aadhaar)*

AGASARA MANJUNATH

**2. Gender** *(select one)* ☑ Male ☐ Female ☐ Transgender

**3. Date of Birth** 01 01 1990

**4. Aadhaar Number** 530680001569

**5. Residence Address**

| | |
|---|---|
| Flat/Door/Building | 63/B |
| Road/Street/Block/Sector | DEVASAMUDRA |
| Post Office | 09 |
| Area/Locality/Town/City | BELLARY |
| District | BALLARI |

State/Union Territory: KARNATAKA Country/Region: INDIA PIN / ZIP CODE: 583129

**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: 91 — Mobile Number: 8105552491

(ii) Email ID: gramaonedevasamudra1@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** | |
| Father's Middle Name | |
| Father's Last Name | DYANNA |

| | |
|---|---|
| **14. Mother's First Name** | |
| Mother's Middle Name | |
| Mother's Last Name | NAGAMMA |

**15. Name of parent to be printed on Permanent Account Number card** *(select one)* ☑ Father ☐ Tick Mother

## PART D - Assessing Officer (AO Code)

**16. Assessing Officer** (AO Code)

(i) Area Code: KAR (ii) AO Type: W
(iii) Range Code: 421 (iv) AO No.: 91

## PART E- Representative Assessee, if applicable

| | |
|---|---|
| **17. RA's First Name** | |
| RA's Middle Name | |
| RA's Last Name | |

**18. Permanent Account Number** *(if any)*

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

**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

**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

## Part F: Communication Address

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

## Part G: Declaration by Applicant or by Representative Assessee on behalf of the Applicant

**23. Documents submitted as Proof of Identity, Proof of Address and Proof of Date of Birth of the Applicant**

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

### *Verification & Declaration*

a. I, AGASARA MANJUNATH……., 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. BALLARI

Date.. 16/07/2026

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

Name: AGASARA MANJUNATH

Designation: AUTHORIZED PERSON

सत्यमेव जयते
भारत सरकार

आधार

ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ/ Enrolment No.: 4050/11011/03688

To
ಅಗಸರ ಮಂಜುನಾಥ
Agasara Manjunath
S/O: Dyanna
63/b
Devasamudra
Bellary Karnataka - 583129
8105552491

Signature valid
Digitally signed by UNIQUE IDENTIFICATION AUTHORITY OF INDIA-05
Date: 2022.[illegible] 11:20:13 UTC

ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

**5306 8000 1569**

VID : 9196 5706 5511 2959

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ಭಾರತ ಸರ್ಕಾರ
Government of India

ಅಗಸರ ಮಂಜುನಾಥ
Agasara Manjunath
ಜನ್ಮ ದಿನಾಂಕ/DOB: 01/01/1990
ಪುರುಷ/ MALE

Issue Date: 09/05/2014

**5306 8000 1569**

VID : 9196 5706 5511 2959

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

national health authority
सत्यमेव जयते

Ayushman Bharat Health Account (ABHA)
आयुष्मान भारत स्वास्थ्य खाता (आभा)

Name/ ಹೆಸರು
**Agasara Manjunath**
**ಅಗಸರ ಮಂಜುನಾಥ**

Abha Number/ ಅಭಾ ಸಂಖ್ಯೆ
**91-5217-2881-2467**

Abha Address/ ಅಭಾ ವಿಳಾಸ
**91521728812467@abdm**

| Gender/ ಲಿಂಗ | Date Of Birth/ ಹುಟ್ಟಿದ ದಿನಾಂಕ | Mobile/ ಮೊಬೈಲ್ |
|---|---|---|
| Male / ಗಂಡು | 01-01-1990 | 8105552491 |

national health authority
सत्यमेव जयते

Ayushman Bharat Health Account (ABHA)
आयुष्मान भारत स्वास्थ्य खाता (आभा)

**Instructions** **Toll-Free Number: 1800 114 477**

- With this ABHA you have become a part of India's digital health ecosystem.
  इस आभा के साथ आप भारत के डिजिटल हेल्थ इकोसिस्टम का हिस्सा बन गए हैं।
- ABHA provides you a unique identification and helps in storing - safekeeping all your digital health records at one place.
  आभा आपको एक विशिष्ट पहचान प्रदान करता है और आपके सभी डिजिटल स्वास्थ्य रिकॉर्ड को सुरक्षित एक ही स्थान पर संग्रहीत रखने में मदद करता है।
- You can download the ABHA mobile app, Aarogya Setu or other ABDM enabled app to view and share your digital health records with ABDM registered healthcare service providers.
  आप एबीडीएम पंजीकृत स्वास्थ्य सेवा प्रदाताओं के साथ अपने डिजिटल स्वास्थ्य रिकॉर्ड देखने और साझा करने के लिए आभा मोबाइल ऐप, आरोग्य सेतु या अन्य एबीडीएम सक्षम ऐप डाउनलोड कर सकते हैं।
- If this card is lost kindly download it from www.abha.abdm.gov.in, it is digitally acceptable.
  यदि यह कार्ड खो जाता है तो कृपया इसे www.abha.abdm.gov.in से डाउनलोड करें, यह डिजिटल रूप से स्वीकार्य है।