



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

B I N D U

Middle Name

B E L U V A L L I

Last Name

C H A N D R A S H E K H A R

B. Name (as per Aadhaar)

B I N D U B C

2. Gender (select one)

☐ Male ☒ Female ☐ Transgender

3. Date of Birth

0 9 0 9 2 0 0 8

4. Aadhaar Number

8 5 9 1 6 4 3 4 1 6 1 1

5. Residence Address

Flat/Door/Building

C / O C H A N D R A S H E K A R B H

Road/Street/Block/Sector

B E L U V A L L I

Post Office

K O L A G U N D A

Area/Locality/Town/City

A R S I K E R E

District

H A S S A N

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5 7 3 1 2 5

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 2 3 7 4 5

(ii) Email ID

ganesh123bvr@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

C H A N D R A S H E K A R

Father's Middle Name

B E L U V A L L I

Father's Last Name

H A N U M 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]

19. Aadhaar Number (if Permanent Account Number is not available)	6	7	7	1	9	9	0	8	0	9	7	1
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[illegible]

(i) Mobile Number	Country Code		9	1	Mobile Number	7	0	1	9	5	2	3	7	4	5	
(ii) Email ID	ganesh123bvr@gmail.com															
(iii) Landline No. with STD Code (<i>if any</i>)	STD Code					Landline Number										

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

☒ (i) Proof of Identity ☒ (ii) Proof of Address ☒ (iii) Proof of Date of Birth

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

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 **HASSAN**

Date..22/07/2026

Chandrasekaran B.H.

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

Name: **BINDU B C**

Designation: REPRESENTATIVE ASSESSEE

 ಭಾರತ ಸರ್ಕಾರ
Government of India

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Issue Date: 16/05/2014



ಬಿಂದು ಬಿ ಸಿ
Bindu B C
ಜನ್ಮ ದಿನಾಂಕ / DOB: 09/09/2008
ಸ್ತ್ರೀ / Female

8591 6434 1611

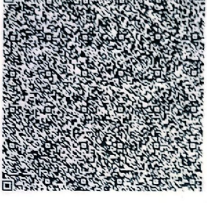
ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

 ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

 AADHAAR

Print Date: 29/09/2023

ವಿಳಾಸ: D/O: ಚಂದ್ರಶೇಖರ್ ಬಿ ಹೆಚ್, ಬೆಲುವಳ್ಳಿ, ಹಾಸನ, ಕರ್ನಾಟಕ, 573125
Address: D/O: Chandrashekhar B H, Beluvalli, Hassan, Karnataka, 573125



8591 6434 1611

1947 help@uidai.gov.in www.uidai.gov.in



ಕರ್ನಾಟಕ ಸರ್ಕಾರ
GOVERNMENT OF KARNATAKA



008037038

ಕರ್ನಾಟಕ ಶಾಲಾ ಪರೀಕ್ಷೆ ಮತ್ತು ಮೌಲ್ಯನಿರ್ಣಯ ಮಂಡಲಿ, ಬೆಂಗಳೂರು
Karnataka School Examination and Assessment Board, Bengaluru
ಅಂಕಪಟ್ಟಿಹಾಗೂ ಪ್ರಮಾಣ ಪತ್ರ / Marksheet Statement cum Certificate

ಈ ಕೆಳಗೆ ನಮೂದಿತ ಅಭ್ಯರ್ಥಿಯು ಎಸ್.ಎಸ್.ಎಲ್.ಸಿ. ಪರೀಕ್ಷೆಯಲ್ಲಿ ತೇರ್ಗಡೆಯಾಗಿರುವುದನ್ನು ಪ್ರಮಾಣೀಕರಿಸಿದೆ.
This is to certify that the below mentioned candidate has passed S.S.L.C. Examination.

ಭಾಗ - ೧ / PART - A

ಭಾಗ - ಬ / PART - B

KSEARKSEABKSFABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKS

BANAVARA, ARASIKERE TQ, HASSAN DIST- 573112

Maryanne

ಅಧ್ಯಕ್ಷರು
Chairperson



ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ

ಭಾರತ ಸರ್ಕಾರ

Unique Identification Authority of India
Government of India

ನೋಂದಾವಣೆ ಕ್ರಮ ಸಂಖ್ಯೆ / Enrollment No.: 1171/27508/00474

To
ಚಂದ್ರಶೇಖರ
Chandrashekhara B H
S/O: Hanumegowda
51 Belavalli
Belavalli
Kolagunda
Kolagunda
Arasikere Hasan
Karnataka 573125
9008925215

01/11/2013

64987780



MN649877801FT



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

6771 9908 0971

ಆಧಾರ್ - ಶ್ರೀಸಾಮಾನ್ಯನ ಅಧಿಕಾರ



ಭಾರತ ಸರ್ಕಾರ

Government of India



ಚಂದ್ರಶೇಖರ
Chandrashekhara B H
ಜನ್ಮ ದಿನಾಂಕ / DOB : 01/01/1971
ಪುರುಷ / Male



6771 9908 0971

ಆಧಾರ್ - ಶ್ರೀಸಾಮಾನ್ಯನ ಅಧಿಕಾರ