

**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

L A M B A N I

Middle Name

A R U N

Last Name

K U M A R

B. Name (as per Aadhaar)

L A R U N K U M A R

2. Gender (select one)

Male



Female



Transgender

3. Date of Birth

1

3

1

2

2

0

1

3

4. Aadhaar Number

8

4

2

7

7

6

8

6

8

1

8

5

5. Residence Address

Flat/Door/Building

C / O

L

V

E

N

K

A

T

E

S

H

A

N

A

I

K

Road/Street/Block/Sector

S

E

V

A

L

A

L

S

T

R

E

E

T

,

K

T

A

N

D

A

Post Office

K

E

N

C

H

A

N

A

G

U

D

D

A

Area/Locality/Town/City

K

E

N

C

H

A

N

A

G

U

D

D

A

District

B

A

L

L

A

R

I

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5

8

3

1

2

1

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

9

9

4

5

5

9

4

4

3

5

(ii) Email ID

manforever.honey143@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

L A M B A N I

Father's Middle Name

V E N K A T E S H A

Father's Last Name

N A I K

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.	9	1

[illegible]

18. Permanent Account Number (if any)

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19. Aadhaar Number (if Permanent Account Number is not available)	5	4	6	6	6	4	4	1	4	7	9	1
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Flat/Door/Building	C	/	O	L	V	E	N	K	A	T	E	S	H	A	N	A	I	K				
Road/Street/Block/Sector	S	E	V	A	L	A	L	S	T	R	E	E	T	,	K	T	A	N	D	A		
Post Office	K	E	N	C	H	A	N	A	G	U	D	D	A									
Area/Locality/Town/City	K	E	N	C	H	A	N	A	G	U	D	D	A									
District	B	A	L	L	A	R	I															
State/Union Territory	KARNATAKA				Country/Region				INDIA				PIN / ZIP CODE				5	8	3	1	2	1

[illegible]

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 **BALLARI**

Date.. 24/07/2026

ಎಂ.ಕೆ.ಎಚ್

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

Name: L ARUN KUMAR

Designation: REPRESENTATIVE ASSESSEE



ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ / Enrollment No.: 0821/90939/01553

To

ಎಲ್ ಅರುಣ ಕುಮಾರ್

L Arun Kumar

S/O: L Venkatesha Naik,

#1/221,

Sevalal street, k Tanda,

VTC: Kenchanagudda,

PO: Kenchanagudda,

Sub District: Siruguppa, District: Bellary,

State: Karnataka,

PIN Code: 583121,

Mobile: 9945594435

54015657



MK540156574FE



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

8427 7686 8185

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India



Aadhaar no. Issued: 25/07/2015



ಎಲ್ ಅರುಣ ಕುಮಾರ್

L Arun Kumar

ಜನ್ಮ ದಿನಾಂಕ / DOB : 13/12/2013

ಪ್ರಕಾರ / Male

ಆಧಾರ್ ಗುರುತಿನ ಪುರಾವೆಯಾಗಿದೆ, ಜೊತೆಗೆ ಅಭಿಧಾ ವಸ್ತು ದಿನಾಂಕದ ಪುರಾವೆ ಅಲ್ಲ. ಇದನ್ನು ಆನ್‌ಲೈನ್ ವೈದಿಕರಣ ಅಥವಾ ಒನ್ ಕೋಡ್ / ಆನ್‌ಲೈನ್ ಸಹಿ ಸ್ವಾ-ಸಿಂಗ್‌ಮೆಂಟ್ ಮೂಲಕ ಬಳಸಬೇಕು.

Aadhaar is proof of identity, not of citizenship or date of birth. It should be used only with verification (online authentication or scanning of QR code / offline XML)

8427 7686 8185

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



**national
health
authority**

Ayushman Bharat Health Account (ABHA)

आयुष्मान भारत स्वास्थ्य खाता (आभा)



Name/ नाम

L. Arun Kumar

ఎల్ అరుణ కుమార్

Abha Number/ అభా నంబర్

91-6108-2852-0300

Abha Address/ అభా డ్రెస్

Lkumar6029@abdm



Gender/ లింగ

Male / పురుషుడు

Date Of Birth/ జన్మదినం

13-12-2013

Mobile/ మొబైల్ నంబర్

9945594435



**national
health
authority**

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.
ఇది ఆభా తో సాథి ఆంధ్ర ప్రదేశ్ డిజిటల్ హెల్త్ ఇకొసాస్టమ్ కి భాగం అవుతుంది.
- ABHA provides you a unique identification and helps in storing - safekeeping all your digital health records at one place.
ఆభా మీకు ఒక విశిష్ట గుర్తింపుని ఇస్తుంది మరియు మీ డిజిటల్ హెల్త్ రికార్డ్స్ ఒకే స్థానంలో నిల్వ చేయడంలో సహాయం చేస్తుంది.
- 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.
మీ డిజిటల్ హెల్త్ రికార్డ్స్ చూడడానికి మరియు ఇతర ఆరోగ్య సేవ ప్రదాతలతో సహా మీ డిజిటల్ హెల్త్ రికార్డ్స్ పంచుకోవడానికి మీరు ఆభా మొబైల్ ఐఏ, ఆరోగ్య సేతు లేదా ఇతర ఆబిఎమ్ సపోర్ట్డ్ ఐఏ డౌన్లోడ్ చేయవచ్చు.
- If this card is lost kindly download it from www.abha.abdm.gov.in, it is digitally acceptable.
పెట్టికా కోల్పోయినట్లయితే www.abha.abdm.gov.in నుండి డౌన్లోడ్ చేయండి, ఇది డిజిటల్ రూపంలో అంగీకరించబడింది.



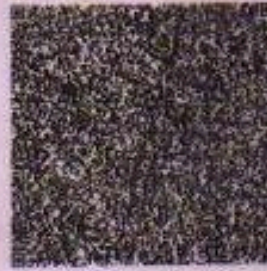
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Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ / Enrolment No.: 1190/08690/17669

Download Date: 26/01/2021
To
ವೆಂಕಟೇಶ ನಾಯ್ಕ
Venkatesha Naik
S/O Ramachandra Naik
#55
00
K Tanda
Sevalal street
Kenchanagudda
Kenchanagudda
Bellary Karnataka - 583121
9945504435
Issue Date: 15/07/2015

Signature valid



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

5466 6441 4791

VID : 9123 3090 8197 5817

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India

Download Date: 26/01/2021



ವೆಂಕಟೇಶ ನಾಯ್ಕ
Venkatesha Naik
ಜನ್ಮ ದಿನಾಂಕ/DOB: 01/01/1981
ಪ್ರಕಾರ/ MALE

Issue Date: 15/07/2015

5466 6441 4791

VID : 9123 3090 8197 5817

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು