

**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

P A R V A T H I

Middle Name

K I T H A G A L A L E

Last Name

E R A I A H

B. Name (as per Aadhaar)

P A R V A T H I K E

2. Gender (select one)☐ Tick

Male

☒ Tick

Female

☐ Tick

Transgender

3. Date of Birth

1 4 0 4 1 9 9 8

4. Aadhaar Number

7 4 0 6 5 7 6 1 9 1 1 1

5. Residence Address

Flat/Door/Building

1 8 8

Road/Street/Block/Sector

S H A N T H A L L I

Post Office

S H A N T H A L L I

Area/Locality/Town/City

S H A N T H A L L I

District

K O D A G U

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5 7 1 2 3 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

9 9 0 2 5 9 6 0 3 8

(ii) Email ID

ashwinganapathy00@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

S U N I L

Father's Middle Name

S H A N T H A L L I

Father's Last Name

C A N D R 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

18. Permanent Account Number (<i>if any</i>)									
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[illegible]

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

[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

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

PARVATHI K E

a. I, PARVATHI K E, 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_KODAGU

Date..28/07/2026

SELF

(Self/ Representative Assessee) do hereby declare that

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

Parvathi . K . F

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

Name: PARVATHI K E

Designation: **AUTHORIZED PERSON**



ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

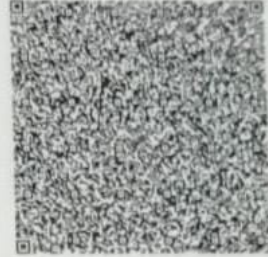
ನೋಂದಾವಣೆ ಕ್ರಮ ಸಂಖ್ಯೆ / Enrollment No. : 2842/27603/09885

To
Parvathi K E
ವಾಸವಾಸಿ ಕೆ ಈ
C/O: S C Sunil,
#188,
VTC: Shanthalli, PO: Shanthalli,
Sub District: Somwarpet, District: Kodagu,
State: Karnataka, PIN Code: 571236,
Mobile: 9902596038

90695778



KF906957783FI



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

7406 5761 9111

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India



Issue Date: 31/12/2013



ವಾಸವಾಸಿ ಕೆ ಈ
Parvathi K E
ಜನ್ಮ ದಿನಾಂಕ / DOB: 14/04/1998
ಸ್ತ್ರೀ / Female

7406 5761 9111

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಚುನಾವಣಾ ಆಯೋಗ

ELECTION COMMISSION OF INDIA

ಮತದಾರರ ಭಾವಚಿತ್ರವಿರುವ ಗುರುತಿನೆ ಚೀಟಿ

Electors Photo Identity Card



UTZ4336996



ಹೆಸರು : ಪಾರ್ವತಿ ಕೆ ಈ

Name : Parvathi K E

ಗಂಡನ ಹೆಸರು : ಸುನಿಲ್ ಎಸ್ ಸಿ

Husband's Name : Sunil S C

Color/Gender :

ಮಹಿಳೆ / Female

ಜನ್ಮ ದಿನಾಂಕ/ವಯಸ್ಸು

14-04-1998

Date of Birth/ Age :

ವಿಳಾಸ : 188, ಶಾಂತಲ್ಲಿ, ಶಾಂತಲ್ಲಿ, ಶಾಂತಲ್ಲಿ

ಕಾಂಗ್ರೆಸ್ ಮನಾರವೇಣಿ ತಾಲೂಕು ಕೊಡಗು ಜಿಲ್ಲೆ 571236

Address : 188, Shanthalli, Shanthalli, Shanthalli

Post, Somwarpet Tq., KODAGU Dist., 571236



ದಿನಾಂಕ/ Date : 15-01-2021

ಮತದಾರರ ನೋಂದಣಾಧಿಕಾರಿ

Electoral Registration Officer

ವಿಧಾನ ಸಭಾ ಕ್ಷೇತ್ರದ ಸಂಖ್ಯೆ ಮತ್ತು ಹೆಸರು : 208-ಮಡಿಕೇರಿ

Assembly Constituency No. and Name : 208-Madikeri

ಭಾಗದ ಸಂಖ್ಯೆ ಮತ್ತು ಹೆಸರು : 6-ಸರ್ಕಾರಿ ಮಾದರಿ ಪ್ರಾಥಮಿಕ
ಶಾಲೆ ಶಾಂತಲ್ಲಿ

Part No. and Name : 6-Govt Model Primary School
Shanthalli

Note 1 : Mere possession of this card is no guarantee that you are elector in the current electoral roll. Please check your name in the current electoral roll before every election.

Note 2 : Date of Birth mentioned in this card shall not be treated as a proof of age/ D.O.B for any purpose other than registration in electoral roll.