

**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

F A R H A N A B I

B. Name (as per Aadhaar)

F A R H A N A B I

2. Gender (select one)☐ Tick

Male

☒ Tick

Female

☐ Tick

Transgender

3. Date of Birth

0 4 0 6 1 9 9 8

4. Aadhaar Number

5 6 1 0 6 3 1 4 9 1 9 3

5. Residence Address

Flat/Door/Building

1 1

Road/Street/Block/Sector

K U D U M A L A K U N T E

Post Office

K U D U M A L A K U N T E

Area/Locality/Town/City

G O W R I B I D A N U R U

District

C H I K K A B A L L A P U R

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5 6 1 2 0 8

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 9 8 1 6 9 6 5 6 9

(ii) Email ID

SIRI888000888@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

K H A S I M S A B

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	1	2	8	(iv) AO No.	9	4

[illegible][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

FARHANABI

a. I, FARHANABI, 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. CHIKKABALLAPUR

Date..05/08/2026

ಅಶ್ವನು

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

Name: FARHANABI

Designation: **AUTHORIZED PERSON**



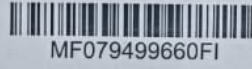
ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ / Enrollment No.: 0657/07701/11157

To
ಪರ್ಹಾನಬಿ
Farhanabi
KUDUMALAKUNTE, Gouribidanuru talluku,
VTC: Kudumalakunte,
PO: Doddakurugodu,
Sub District: Gauribidnur, District: Chikkaballapur,
State: Karnataka,
PIN Code: 561208,
Mobile: 8762149131

17/11/2013
7949966



MF079499660FI



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

5610 6314 9193

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India



ಪರ್ಹಾನಬಿ
Farhanabi
ಜನ್ಮ ದಿನಾಂಕ / DOB : 04/06/1998
ಸ್ತ್ರೀ / Female

5610 6314 9193

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

17/11/2013



ಭಾರತ ಚುನಾವಣಾ ಆಯೋಗ
ಗುರುತಿನ ಚೀಟಿ

**ELECTION COMMISSION OF INDIA
IDENTITY CARD**

ALQ3191004



ಮತದಾರರ ಹೆಸರು : ಫರ್ಹಾನಾಬಿ

Elector's Name : Farhanabi

ತಂದೆಯ ಹೆಸರು : ಖಾಸಿಂಸಾಬ್

Father's Name : Khasimsab

ಲಿಂಗ / Sex : ಮಹಿಳೆ / Female

ಜನ್ಮದಿನಾಂಕ / Date of Birth : 04/08/1998

ALQ3191004
ವಿಳಾಸ / Address :

#11, ಕುಡುಮಲಕುಂಟೆ,
ಗೌರಿಬಿದನೂರು ತಾಲ್ಲೂಕು,
CHIKABALLAPUR ಜಿಲ್ಲೆ - 561208.
#11, Kudumalakunte,
Gowribidanuru Tq.,
CHIKABALLAPUR Dist. - 561208.
Date: 20/12/2018

139 - ಗೌರಿಬಿದನೂರು ವಿಧಾನ ಸಭಾ ಕ್ಷೇತ್ರದ ಮತದಾರರ
ನೋಂದಣಾಧಿಕಾರಿಯವರ ಅಧಿಕೃತ ಸಹಿ

Facsimile Signature of Electoral Registration
Officer 139 - Gauribidanur Assembly Constituency
ವಿಳಾಸ ಬದಲಾವಣೆಯಾಗಿದ್ದಲ್ಲಿ, ಬದಲಾದ ವಿಳಾಸದ ಮತದಾರರ
ಪಟ್ಟಿಯಲ್ಲಿ ನಿಮ್ಮ ಹೆಸರನ್ನು ಸೇರಿಸಲು ಸೂಕ್ತ ನಮೂನೆಯಲ್ಲಿ ಈ
ಗುರುತಿನ ಚೀಟಿಯ ಸಂಖ್ಯೆಯನ್ನು ನಮೂದಿಸಿ.

In case of change in address, mention this Card
No. in the relevant form for including your name in
the roll at the changed address.
012/0926