

**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

M A N Y A S H R E E

B. Name (as per Aadhaar)

M A N Y A S H R E E

2. Gender (select one)☐ Tick

Male

☒ Tick

Female

☐ Tick

Transgender

3. Date of Birth

0 6 0 6 2 0 0 8

4. Aadhaar Number

9 2 2 0 9 1 9 5 6 8 9 2

5. Residence Address

Flat/Door/Building

0 1

Road/Street/Block/Sector

T H O N D I G A N A H A L L I P O S T , B A

Post Office

M A N A K A T H U R

Area/Locality/Town/City

A R S I K E R E T A L U K , M A N A K A T H

District

H A S S A N

State/Union Territory

K A R N A T A K A

Country/Region

I N D I A

PIN / ZIP CODE

5 7 3 1 1 2

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 6 8 6 4 7 7 0 4 2

(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)**☐ 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

S I D D E S H 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]

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				

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
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24. Documents submitted as Proof of Identity, Proof of Address of Representative Assessee

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

MANYASHREE

a. I, _____, 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. **HASSAN**

Date. **31/08/2026**

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

Name: _____ **MANYASHREE**

Designation: _____ **AUTHORIZED PERSON**



ಭಾರತ ಸರ್ಕಾರ
Government of India

Issue Date: 03/06/2017



ಮಾನ್ಯಶ್ರೀ
Maniyashree
ಜನ ದಿನಾಂಕ/DOB: 06/06/2008
FEMALE

9220 9195 6892

VID : 9172 6946 9413 5999

ಶಿವಲಿಂಗ್. ನನ್ನ ಗುರುತು



ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India



ವಿಳಾಸ:
ಕಂದೆ / ಕಾಯಾಯ ಹೆಬ್ಬಾಳೆ, ಮನಕಾಥೂರು
ಪೊನ್ನಾಳಿ, ಬಾವರಾ ಹೊಬ್ಬಳಿ,
ಆರ್ಸಿಕೇರಿ ತಾಲ್ಲೂಕು, ಮಣಕಾಥೂರು, ಹಾಸನ,
ಕರ್ನಾಟಕ - 573112

Address:
D/O: Siddesha, Manakathur, Thondiganahalli
post, Banavara hobali, Arsikere Taluk,
Manakathur, Hassan,
Karnataka - 573112



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