



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

H E E N A

Middle Name

K I R T I

Last Name

P O K A R

B. Name (as per Aadhaar)

H E E N A

K I R T I

P O K A R

2. Gender (select one)

☐ Tick

Male

☒ Tick

Female

☐ Tick

Transgender

3. Date of Birth

0 1

0 1

1 9 8 6

4. Aadhaar Number

9 8 6 0 6 8 2 5 7 9 7 5

5. Residence Address

Flat/Door/Building

H . N O :

K I R T I

P O K A R

Road/Street/Block/Sector

N I P P A N I

R O A D

Post Office

S A N K E S H W A R

Area/Locality/Town/City

S A N K E S H W A R

District

B E L A G A V I

State/Union Territory

K A R N A T A K A

Country/Region

I N D I A

PIN / ZIP CODE

5 9 1 1 1 3

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

6 3 6 0 8 0 2 0 5 7

(ii) Email ID

karnatakaonesankeshwar01@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 O M J I B H A I

Father's Middle Name

Father's Last Name

V A S A N I

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	5	2	1	(iv) AO No.	9	3

[illegible][illegible][illegible][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

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

SELF

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. BELAGAVI

Date..29/08/2026

Heema

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

Name: HEENA KIRTI POKAR

Designation: **AUTHORIZED PERSON**



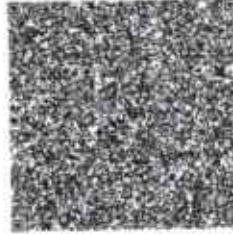
ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ / Enrolment No.: S132/40524/68970

To
ಹೆಮಾ ಕಿರಿ ಪೋಕರ್
Hema Kiri Pokar
W/O: Kiri Pokar,
Nippani Road, Sankeshwar,
TD- Hukkeri,
VTL: Sankeshwar (RU),
PC: Sankeshwar,
Sub District: Hukkeri,
District: Belgaum,
State: Karnataka,
PIN Code: 591313
Mobile: 6360602057

Signature valid



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

9860 6825 7975
VID : 9196 6232 2133 3187

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India

Aadhaar no. issued: 28/04/2013



ಹೆಮಾ ಕಿರಿ ಪೋಕರ್
Hema Kiri Pokar
ಜನ್ಮ ದಿನಾಂಕ/DOB: 01/01/1986
ಸ್ತ್ರೀ/FEMALE

ಆಧಾರ್ ಗುರುತಿನ ಪುರಾವೆಯಾಗಿದೆ, ಅದರಲ್ಲಿ ಆಧಾರ್ ಸಂಖ್ಯೆ ಮತ್ತು ಜನ್ಮ ದಿನಾಂಕದ ಪುರಾವೆ ಇದೆ. ಇದನ್ನು ಅಧಿಕಾರಿಗಳ ಮುಂದೆ ಹಾಕುವಾಗ ಅದರ ಮೇಲೆ 'ಆಧಾರ್' ಎಂಬ ಪದವನ್ನು ಬರೆಯುವುದು ಅಗತ್ಯವಿದೆ.

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 Aha).

9860 6825 7975

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



**national
health
authority**

Ayushman Bharat Health Account (ABHA)
आयुष्मान भारत स्वास्थ्य खाता (आभा)



Name/ नाम

Heena Kirti Pokar

हीना किरति पोरकार

Abha Number/ अभ्या संख्या

91-2868-7361-7711

Abha Address/ अभ्या विवरण

heena.pokar@abdm



Gender/ लिंग

Female / महिला

Date Of Birth/ जन्मदिनांक

01-01-1986

Mobile/ मोबाइल

6360802057



**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.
इस आभा के साथ आप भारत के डिजिटल हेल्थ इकोसिस्टम का हिस्सा बन गए हैं।
- ABHA provides you a unique identification and helps in storing - safekeeping all your digital health records at one place.
आभा आपको एक विशिष्ट पहचान प्रदान करता है और आपके सभी डिजिटल स्वास्थ्य रिकॉर्ड को सुरक्षित एक ही स्थान पर संग्रहीत रखने में मदद करता है।
- 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.
आप एबीडीएम पंजीकृत स्वास्थ्य सेवा प्रदाताओं के साथ अपने डिजिटल स्वास्थ्य रिकॉर्ड देखने और साझा करने के लिए आभा मोबाइल ऐप, आरोग्य सेतु या अन्य एबीडीएम सक्षम ऐप डाउनलोड कर सकते हैं।
- If this card is lost kindly download it from www.abha.abdm.gov.in, it is digitally acceptable.
यदि यह कार्ड खो जाता है तो कृपया इसे www.abha.abdm.gov.in से डाउनलोड करें, यह डिजिटल रूप से स्वीकार्य है।