

**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

S P O O R T H I

Middle Name

B O M E N A H A L L I

Last Name

M A N J A P P A

B. Name (as per Aadhaar)

S P O O R T H I B M

2. Gender (select one)☐ Tick

Male

☒ Tick

Female

☐ Tick

Transgender

3. Date of Birth

0 5 0 9 2 0 0 7

4. Aadhaar Number

3 1 8 8 0 2 1 4 1 1 8 9

5. Residence Address

Flat/Door/Building

0 1

Road/Street/Block/Sector

B O M M E N A H A L L I

Post Office

D U D D A

Area/Locality/Town/City

H A S S A N

District

H A S S A N

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5 7 3 1 1 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

9 0 1 9 9 2 2 5 5 0

(ii) Email ID

spoorthi2000727@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

M A N J A P P 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

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							

[illegible]

22. Address for Communication (select one) ☒ Residence Address ☐ Representative Assessee Address ☐ Office Address

☒ (i) Proof of Identity ☒ (ii) Proof of Address ☒ (iii) Proof of Date of Birth

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

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Spoorthei BM

Designation: **AUTHORIZED PERSON**



ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ/ Enrolment No.: 0804/55446/02051

To
ಸ್ಪೋರ್ಟ್ ಬಿ ಎಮ್
Sporthi B M
D/O: Manjappa,
Dudda Hobli,
VTC: Bommesahalli,
Sub District: Ahr,
District: Hassan,
State: Karnataka,
PIN Code: 573118
Mobile: 9019922550

Signature valid

Digitally signed by Sporthi B M
DN: cn=Sporthi B M, o=Unique
Identification Authority of India,
c=IN



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

3188 0214 1189

VID : 9177 8324 4184 4064

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India

Aadhaar no. 3188-0214-1189



ಸ್ಪೋರ್ಟ್ ಬಿ ಎಮ್
Sporthi B M
ಜನ್ಮ ದಿನಾಂಕ/DOB: 05/09/2007
ಸ್ತ್ರೀ / FEMALE

ಆಧಾರ್ ಗುರುತಿನ ಪ್ರಮಾಣವಾಗಿದೆ, ಭೌತಿಕ ಅಥವಾ ಅನ್ಯ ರೀತಿಯಿಂದ ಪೂರೈ
ಇದು ಇದನ್ನು ಆಧಾರ್‌ನಲ್ಲಿ ವೈದಿಕರಿಸಿರುವ ಅಥವಾ ಈ ಕೆಳಗೆ / ಅಭಿಮತ ಸಹ
ಮಾನ್ಯ ರೀತಿಯಿಂದ ಮಾತ್ರ 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.)

3188 0214 1189

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