



Manugowdamanuwiz A. J. J.



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

M A N J U N A T H

Middle Name

A G A S A R A H A T T I

Last Name

J A Y A N N A

B. Name (as per Aadhaar)

M A N J U N A T H A J

2. Gender (select one)

☒ Male

☐ Female

☐ Transgender

3. Date of Birth

1 3 0 3 2 0 0 6

4. Aadhaar Number

8 1 4 3 8 3 5 9 8 0 8 6

5. Residence Address

Flat/Door/Building

2 1 3

Road/Street/Block/Sector

D O D D A M A N D I G A N A H A L L Y , B E H

Post Office

Area/Locality/Town/City

K A N D A L I

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 2 1 7

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)

☒ Resident

☐ Non Resident

☐ 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

8 0 7 3 5 3 6 6 4 2

(ii) Email ID

manugowdamanuwiz@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)

☐ Salary

☐ Income from Business/Profession

☐ Income from House Property

☐ Capital Gains

☒ Income from Other Sources

☐ No Income

PART C - Details of Parents

12. Whether mother/father is a single parent? (select one)

☐ Yes

☒ No

13. Father's First Name

J A Y A N N A

Father's Middle Name

A G A S A R A H A T T I

Father's Last Name

V E N K A T E G O W D 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

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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

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

MANJUNATH A J

a. I, MANJUNATH A J, 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 30/08/2026

Maryimatu A. J

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

Name: MANJUNATH A J

Designation: **AUTHORIZED PERSON**



ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ / Enrolment No.: 0648/16390/01713

To
ಮಂಜುನಾಥ್ ಎ ಜಿ
Manjunath A J
S/O: Jayanna A V
#213
Doddamandiganahally
Behind S V M School
Kandali
Hasan Karnataka - 573217
9353632023



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

8143 8359 8086

VID : 9186 1327 1537 2152

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India



ಮಂಜುನಾಥ್ ಎ ಜಿ
Manjunath A J
ಜನ್ಮ ದಿನಾಂಕ/DOB: 13/03/2006
ಪ್ರಕಾರ/ MALE

Issue Date: 28/12/2013

8143 8359 8086

VID : 9186 1327 1537 2152

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ಕರ್ನಾಟಕ ಪ್ರೌಢ ಶಿಕ್ಷಣ ಪರೀಕ್ಷಾ ಮಂಡಳಿ

ಅಂಕ ಪಟ್ಟಿಹಾಗೂ ಪ್ರಮಾಣ ಪತ್ರ / Marks Statement cum Certificate

ಈ ಕೆಳಗೆ ನಮೂದಿತ ಅಭ್ಯರ್ಥಿಯು ಎಸ್.ಎಸ್.ಎಲ್.ಸಿ. ಪರೀಕ್ಷೆಯಲ್ಲಿ ಕೇರ್ಗಡೆಯಾಗಿರುವುದನ್ನು ಪ್ರಮಾಣೀಕರಿಸಿದೆ.

This is to certify that the below mentioned candidate has passed S.S.L.C. Examination.



MACCARI, E72304 11.172