

**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 H I V A K U M A R A

Middle Name

H A N U M A N A H A L L I

Last Name

K U M A R

B. Name (as per Aadhaar)

S H I V A K U M A R A H K

2. Gender (select one)

Male



Female



Transgender

3. Date of Birth

1

9

0

7

2

0

0

8

4. Aadhaar Number

6

6

5

8

8

3

9

9

8

0

8

3

5. Residence Address

Flat/Door/Building

0

1

Road/Street/Block/Sector

H A N U M A N A H A L L I V I L L A G E , T

Post Office

B A N A V A R A

Area/Locality/Town/City

H A N U M A N A H A L L I

District

H A S S A N

State/Union Territory

KARNATAKA

Country/Region

INDIA

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)

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

7

0

2

2

0

6

7

5

1

8

(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)**

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

K U M A R A

Father's Middle Name

S O M A N A H A L L I

Father's Last Name

R A N G A N A T H 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

[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

SHIVAKUMARA H K

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. HASSAN

Date. 16/09/2026

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

Name: _____ SHIVAKUMARA H K

Designation: _____ AUTHORIZED PERSON



सत्यमेव जयते
भारत सरकार



ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಾವಣೆ ಕ್ರಮ ಸಂಖ್ಯೆ / Enrollment No. : 0129/22298/34931

To

Shivakumara H K

ಶಿವಕುಮಾರ ಹೆಚ್ ಕೆ

S/O Kumara S R,

Hanumanahalli Village,

Thondiganahalli Post,

Banavara Hobli,

Arasikere Taluk, Hassan District,

VTC: Hanumanahalli, PO: Banavara,

Sub District: Arasikere, District: Hassan,

State: Karnataka, PIN Code: 573112.

Mobile: 9482548738

44576770



KC445767703FL



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

6658 8399 8083

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



Issue Date: 02/07/2015



ಭಾರತ ಸರ್ಕಾರ

Government of India



ಶಿವಕುಮಾರ ಹೆಚ್ ಕೆ

Shivakumara H K

ಜನ್ಮ ದಿನಾಂಕ / DOB: 19/07/2008

ಪುರುಷ / Male

6658 8399 8083

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