



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

A B H I S H E K A

Middle Name

Last Name

N I I R A L O T I

B. Name (as per Aadhaar)

A B H I S H E K A

N I I R A L O T I

2. Gender (select one)



Male



Female



Transgender

3. Date of Birth

3

1

0

7

1

9

9

3

4. Aadhaar Number

9

4

7

5

3

3

3

3

7

4

6

5

5. Residence Address

Flat/Door/Building

#

6

3

2

Road/Street/Block/Sector

N I I R A L O T I

O N I

1

S

T

W

A

R

D

Post Office

A B B I G E R I

Area/Locality/Town/City

A B B I G E R I

District

G A D A G

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5

8

2

1

1

1

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

9

6

6

3

0

9

4

8

5

6

(ii) Email ID

NEERALOTIABHISHEK@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

G U R U S H I D D A P P A

Father's Middle Name

Father's Last Name

N I I R A L O T 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	4	1	1	(iv) AO No.	1	1

[illegible]

18. Permanent Account Number (if any)

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[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

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

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

ARHISHEKA NIIRAL OTI

ABHISHEKA NIIRALOTI

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. **GADAG**

Date. **17/09/2026**

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

Name: ABHISHEKA NIIRALOTI

Designation: **AUTHORIZED PERSON**



ಭಾರತ ಸರ್ಕಾರ
Government of India

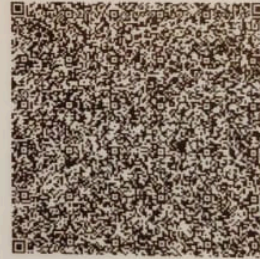
ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ / Enrolment No.: 0172/47004/01381

To
ಅಭಿಷೇಕ ನೀರಲೋಟಿ
Abhisheka Niiraloti
S/O Guru Shiddappa,
#632,
niiraloti oni 1 ne vard,
VTC: Abbigeri,
PO: Abbigeri,
District: Gadag,
State: Karnataka,
PIN Code: 582111
Mobile: 9663094856

Signature valid

Digitally signed by Unique Identification Authority of India
DN: cn=Unique Identification Authority of India
Date: 2020.07.29 09:39:44
+05'30'



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

9475 3333 7465

VID : 9168 2669 1838 8516

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India

Aadhaar no. issued: 24/04/2012



ಅಭಿಷೇಕ ನೀರಲೋಟಿ
Abhisheka Niiraloti
ಜನ್ಮ ದಿನಾಂಕ/DOB: 31/07/1993
ಪುರುಷ/ MALE

ಆಧಾರ್ ಗುರುತಿನ ಪ್ರಮಾಣವಾಗಿದೆ, ಪೌರತ್ವ ಅಥವಾ ಜನ್ಮ ದಿನಾಂಕದ ಪ್ರಮಾಣ
ಅಲ್ಲ. ಇದನ್ನು ಆನ್‌ಲೈನ್ ವೈದಿಕರಣ ಅಥವಾ QR ಕೋಡ್ / ಆಫ್‌ಲೈನ್ XML
ನಿಮ್ಮ ನಿರ್ದೇಶನದ ಮೇರೆಗೆ 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.)

9475 3333 7465

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



Name/ ಹೆಸರು

Abhisheka Niiraloti

ಅಭಿಷೇಕ ನಿರಲೋಟಿ

Abha Number/ ಅಭಾ ಸಂಖ್ಯೆ

91-3052-4567-7185

Abha Address/ ಅಭಾ ವಿಳಾಸ

91305245677185@abdm



Gender/ ಲಿಂಗ
Male / ಗಂಡು

Date Of Birth/ ಹುಟ್ಟಿದ ದಿನಾಂಕ
31-07-1993

Mobile/ ಮೊಬೈಲ್
9663094856

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।