



Ashwath



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

Middle Name

Last Name

A S H W A T H

B. Name (as per Aadhaar)

A S H W A T H

2. Gender (select one)



Male



Female



Transgender

3. Date of Birth

1

7

0

7

2

0

0

1

4. Aadhaar Number

3

4

9

8

8

2

5

8

5

6

7

0

5. Residence Address

Flat/Door/Building

C

/

O

S

O

K

R

I

S

H

N

A

Road/Street/Block/Sector

L

O

K

A

V

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L

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S

T

A

T

E

Post Office

M

U

D

I

G

E

R

E

Area/Locality/Town/City

M

U

D

I

G

E

R

E

District

C

H

I

K

K

A

M

A

G

A

L

U

R

U

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5

7

7

1

3

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

8

9

5

1

2

3

6

0

5

4

(ii) Email ID

ASHWATHASHWATH97770@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

S

O

Father's Middle Name

Father's Last Name

K

R

I

S

H

N

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][illegible][illegible][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

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

a. I, ASHWAITH, 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: CHIKKAMAGALURU

Date..18/09/2026

Ashworth

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

Name: ASHWATH

Designation: **AUTHORIZED PERSON**



ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ಸೇರಾಂಕದ ಸಂಖ್ಯೆ / Enrollment No.: 0648/16375/03918

To
ಅಶ್ವತ್ಥಾ
Ashwath
S/O Krishna,

kasaba hobli,
mudigere taluk,
VTC: Lokavalli Estate, PO: Mudigere,
Sub District: Mudigere, District: Chikkamagaluru,
State: Karnataka,
PIN Code: 577132,
Mobile: 8951236054

31247177



KI312471773FE



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

3498 8258 5670

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India



Aadhaar no. issued: 21/10/2013



ಅಶ್ವತ್ಥಾ
Ashwath
ಜನ್ಮ ದಿನಾಂಕ / DOB: 17/07/2001
ಪುರುಷ / Male

ಆಧಾರ್ ಗುರುತಿನ ಪುರಾವೆಯಾಗಿದೆ, ದೇಶೀಯತೆ ಅಥವಾ ಜನ್ಮ ದಿನಾಂಕದ ಪುರಾವೆ ಅಲ್ಲ. ಇದನ್ನು ಆನ್‌ಲೈನ್ ದೃಢೀಕರಣ ಅಥವಾ ಓಎಸ್‌ಎಲ್ / ಆಫ್‌ಲೈನ್ XML ಫೈಲ್ ನಿರ್ಗಮನದೊಂದಿಗೆ ಮಾತ್ರ ಬಳಸಬಹುದು.

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.)

3498 8258 5670

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**national
health
authority**

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



Name/ नाम

Ashwath

अश्वथ

Abha Number/ आभा नंबर

35-2631-8141-3371

Abha Address/ आभा ड्रेस

35263181413371@abdm



Gender/ लिंग
Male / पुरुष

Date Of Birth/ जन्म तिथि
17-07-2001

Mobile/ मोबाइल
8123124137



**national
health
authority**

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



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 स्वास्थ्य 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 आपकी सभी डिजिटल स्वास्थ्य रिकॉर्ड को सुरक्षित एक ही स्थान पर संग्रहीत रखने में मदद करता है।
- You can download the ABHA mobile app, Arogya Setu or other ABDM enabled app to view and share your digital health records with ABDM registered healthcare service providers.
आप एबीडीएम एरोज्या सेतु या अन्य एबीडीएम सक्षम ऐप डाउनलोड कर सकते हैं।
- If this card is lost kindly download it from www.abha.abdm.gov.in as 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।