

**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

H A S S A N

Middle Name

R A N G E

G O W D A

Last Name

L O K E S H

B. Name (as per Aadhaar)

H R L O K E S H

2. Gender (select one)☒ Male☐ Female☐ Transgender**3. Date of Birth**

2 6

0 6

1 9

7 2

4. Aadhaar Number

4 7

5 8

6 1

8 3

5 8

1 4

5. Residence Address

Flat/Door/Building

1 6 3

K A R A N J I

N I L A Y A

Road/Street/Block/Sector

A R A S I K E R E

R O A D

K S

R T

L

Post Office

H A S S A N

Area/Locality/Town/City

H A S S A N

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

0 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 9

8 0

9 6

2 7

2 7

(ii) Email ID

MAMATHAKIRAN2017@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**

L A T E

Father's Middle Name

Father's Last Name

R A N G 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

[illegible][illegible][illegible][illegible]

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

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



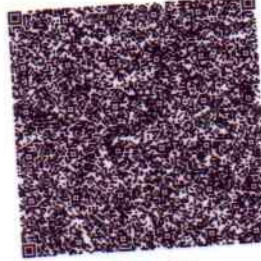
ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ / Enrolment No.: 0129/11029/07704

To
ಹೆಚ್ ಆರ್ ಲೋಕೇಶ್
H R Lokesh
C/O H Range Gowda
#163 karanji Nilaya
Arasikere Road
K S R T layout
B T Koppalu
Hassan
Hassan Karnataka - 573201
9980962727

Signature
e-verify
UTC



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

4758 6183 5814

VID : 9198 3581 2788 7407

ನನ್ನ ಆಧಾರ್. ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India

Issue Date: 23/03/2012



ಹೆಚ್ ಆರ್ ಲೋಕೇಶ್
H R Lokesh
ಜನ್ಮ ದಿನಾಂಕ/DOB: 26/06/1972
ಪುರುಷ/ MALE

4758 6183 5814

VID : 9198 3581 2788 7407

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ಭಾರತ ಚುನಾವಣಾ ಆಯೋಗ

ELECTION COMMISSION OF INDIA



NMD4100376



ಹೆಸರು: ಹೆಚ್ ಆರ್ ಲೋಕೇಶ್

Name: H R Lokesh

ತಂದೆಯ ಹೆಸರು: ಲೇ ರಂಗೇಗೌಡ

Father's Name: Late Rangegowda

ಲಿಂಗ / Gender: ಗಂಡು / Male

ಜನ್ಮ ದಿನಾಂಕ / ವಯಸ್ಸು:

Date of Birth / Age: 26-06-1972



e-Electors Photo Identity Card - ಇ-ಮತದಾರ ಭಾವಚಿತ್ರವಿರುವ ಗುರುತಿನ ಚೀಟಿ

