



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

C

H

A

N

D

I

N

I

B. Name (as per Aadhaar)

C

H

A

N

D

I

N

I

2. Gender (select one)

☐ Tick

Male

☒ Tick

Female

☐ Tick

Transgender

3. Date of Birth

2

2

0

9

2

0

0

8

4. Aadhaar Number

4

5

5

5

3

0

2

0

9

3

2

0

5. Residence Address

Flat/Door/Building

0

1

Road/Street/Block/Sector

A

R

A

K

E

R

E

Post Office

A

R

A

K

E

R

E

Area/Locality/Town/City

A

R

A

K

E

R

E

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)

☒ Tick

Resident

☐ Tick

Non Resident

☐ Tick

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

4

5

3

4

2

8

2

5

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)☐ Tick

Salary

☐ Tick

Income from Business/Profession

☐ Tick

Income from House Property

☐ Tick

Capital Gains

☒ Tick

Income from Other Sources

☐ Tick

No Income

PART C - Details of Parents

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

☐ Tick

Yes

☒ Tick

No

13. Father's First Name

Father's Middle Name

Father's Last Name

B

H

Y

R

E

S

H

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

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							

[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

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

a. I, CHANDINI, 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..27/09/2026

Chandini

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

Name: **CHANDINI**

Designation: **AUTHORIZED PERSON**



ಭಾರತ ಸರ್ಕಾರ
Government of India

Aadhaar no. issued: 27/09/2015



ಚಾಂದಿನಿ
Chandini
ಜನ್ಮ ದಿನಾಂಕ/DOB: 22/09/2008
ಸ್ತ್ರೀ / FEMALE

ಅಧಾರ್ ಗುರುತಿನ ಪುರಾವೆಯಾಗಿದೆ, ಪೌರತ್ವ ಅಥವಾ ಜನ್ಮ ದಿನಾಂಕದ ಪುರಾವೆ ಅಲ್ಲ. ಇದನ್ನು ಅನ್ವಯಿಸುವ ದೃಢೀಕರಣ ಅಥವಾ QR ಕೋಡ್ / ಆಫ್‌ಲೈನ್ XML ಸ್ಕ್ಯಾನಿಂಗ್‌ನೊಂದಿಗೆ 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)

4555 3020 9320

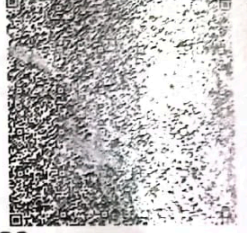
ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

Details as on: 08/09/2026

ವಿಳಾಸ:
ತಂದೆ / ತಾಯಿಯ ಹೆಸರು: ಬೈರೇಶ್, ಅರಕರೆ, ಹಾಸನ,
ಕರ್ನಾಟಕ - 573112
Address:
D/O: Bairesh, Arakere, PO: Arakere, DIST: Hassan,
Karnataka - 573112



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VID : 9164 0494 4015 5897

1947

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