

**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

G E E T A

Middle Name

D O D H A M A N E

Last Name

C H A N G A P P A

B. Name (as per Aadhaar)

G E E T A D C

2. Gender (select one)☐ Tick

Male

☒ Tick

Female

☐ Tick

Transgender

3. Date of Birth

1 8 0 1 1 9 7 0

4. Aadhaar Number

6 9 0 8 6 1 9 9 0 1 2 9

5. Residence Address

Flat/Door/Building

6 4

Road/Street/Block/Sector

M A L L A L L I K U M A R A L L I

Post Office

S O M W A R P E T

Area/Locality/Town/City

S O M W A R P E T

District

K O D A G U

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5 7 1 2 3 6

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

9 3 8 0 2 5 6 4 5 3

(ii) Email ID

chinthugowda29@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

C H A N G 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

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										

(i) Mobile Number	Country Code				Mobile Number											
(ii) Email ID																
(iii) Landline No. with STD Code (<i>if any</i>)	STD Code					Landline Number										

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, _____, 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_KODAGU

Date...05/10/2026

D. C. Greetha

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

Name: **GEETA D C**

Designation: **AUTHORIZED PERSON**



ಭಾರತ ಸರ್ಕಾರ
Government of India

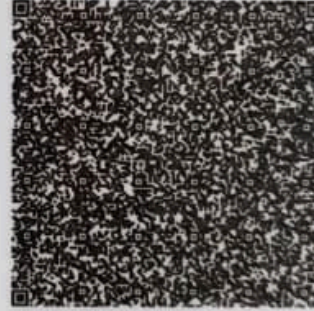
ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ/ Enrolment No.: 2825/07749/06666

To
ಗೀತಾ ಡಿ ಸಿ
Geeta D C
MALLALI
Kumaralli
Kodagu Karnataka - 571236
9380256453

Signature valid

Digitally signed by
UNIQUE IDENTIFICATION
AUTHORITY OF INDIA 05
Date: 2023.08.17 04:32:08
UTC



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

6908 6199 0129

VID : 9182 2241 7411 2645

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India



ಗೀತಾ ಡಿ ಸಿ
Geeta D C
ಜನ್ಮ ದಿನಾಂಕ/DOB: 18/01/1970
FEMALE

Issue Date: 13/08/2013

6908 6199 0129

VID : 9182 2241 7411 2645

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

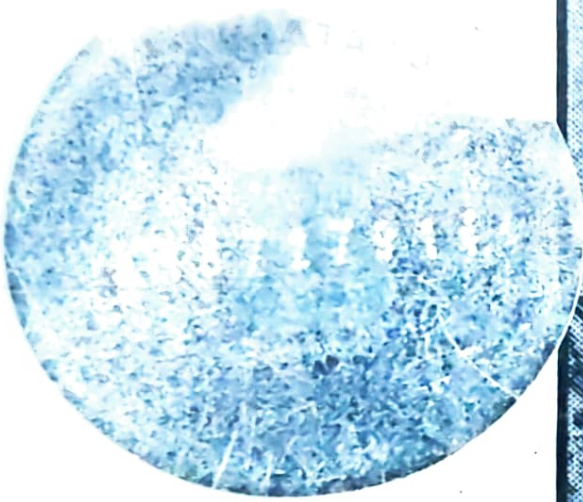


सत्यमेव जयते

ಭಾರತ ಚುನಾವಣಾ ಆಯೋಗ
ಗುರುತಿನ ಚೀಟಿ

ELECTION COMMISSION OF INDIA
IDENTITY CARD

UTZ2001170



ಮತದಾರರ ಹೆಸರು : ಗೀತ

Elector's Name : Geetha

ತಂದೆಯ ಹೆಸರು : ಚಂಗಪ್ಪ

Father's Name : Changappa

ಲಿಂಗ / Sex : ಸ್ತ್ರೀ / F

ಜನ್ಮ ದಿನಾಂಕ / Date of Birth: 01/01/1970

UTZ2001170

ವಿಳಾಸ : 64,ಮಲ್ಲಳ್ಳಿ
ಕುಮಾರಳ್ಳಿ
ಸೋಮವಾರಪೇಟೆ
ಕೊಡಗು 571236

64,Mallalli
Kumaralli

Address : Somwarpet
KODAGU - - 571236

Date :01/03/2009

208, ಮಡಿಕೇರಿ ವಿಧಾನ ಸಭಾ ಕ್ಷೇತ್ರದ
ಮತದಾರರ ನೋಂದಣಾಧಿಕಾರಿಗಳ ಅಧಿಕೃತ ಸಹಿ

Facsimile Signature of
Electoral Registration Officer
208, Madikeri Assembly Constituency

ವಿಳಾಸ ಬದಲಾವಣೆಯಾಗಿದ್ದಲ್ಲಿ, ಬದಲಾದ ವಿಳಾಸದ ಮತದಾರರ ಪಟ್ಟಿಯಲ್ಲಿ
ನಿಮ್ಮ ಹೆಸರನ್ನು ಸೇರಿಸಲು ಮತ್ತು ಇದೇ ಸಂಖ್ಯೆಯ ಗುರುತಿನ ಚೀಟಿ ಪಡೆಯಲು
ಸೂಕ್ತ ನಮೂನೆಯಲ್ಲಿ ಈ ಗುರುತಿನ ಚೀಟಿಯ ಸಂಖ್ಯೆಯನ್ನು ನಮೂದಿಸಿ.

In case of change in address, mention this Card No. in the
relevant form for including your name in the roll at the
changed address and to obtain the card with same number.