



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

P R A M O D

Middle Name

H A L A D A H A L L I

Last Name

T H I M M E G O W D A

B. Name (as per Aadhaar)

P R A M O D H T

2. Gender (select one)



Male



Female



Transgender

3. Date of Birth

2 1 0 4 2 0 0 7

4. Aadhaar Number

8 9 0 9 0 9 4 5 0 8 6 5

5. Residence Address

Flat/Door/Building

C / O T H I M M E G O W D A H A L A D A H

Road/Street/Block/Sector

S H A N T H I G R A M A H O B A L L I , H I

Post Office

M A D E N U R

Area/Locality/Town/City

H A S A N

District

H A S S A N

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5 7 3 2 2 5

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 8 4 5 9 6 1 9 8 0

(ii) Email ID

yukthainsurance@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

T H I M M E G O W D A

Father's Middle Name

H A L A D A H A L L I

Father's Last Name

N A N J 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

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 (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

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

PRAMOD H T

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. **HASSAN**

Date. **05/10/2026**

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

Name: _____ **PRAMOD H T**

Designation: _____ **AUTHORIZED PERSON**



ಭಾರತ ಸರ್ಕಾರ
Government of India

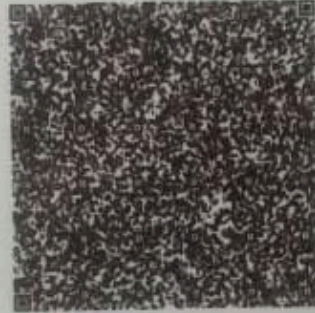
ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ/ Enrolment No.: 2825/02506/01304

To
ಪ್ರಮೋದ್ ಹೆಚ್ ಟಿ
Pramod H T
S/O: Thimmegowda H N
shanthigrama hobali hassan taluku
Hittalaladahalli
Hasan Karnataka - 573225
9845961980

Signature valid

Signature valid
UIDAI/INDIA/2825/02506/01304
Data: 2022-09-18 16:51:20
UTC



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

8909 0945 0865

VID : 9119 4337 6567 3216

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India



ಪ್ರಮೋದ್ ಹೆಚ್ ಟಿ
Pramod H T
ಜನ್ಮ ದಿನಾಂಕ/DOB: 21/04/2007
ಪುರುಷ/ MALE

Issue Date: 12/10/2013

8909 0945 0865

VID : 9119 4337 6567 3216

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



23345550

GOVERNMENT OF KARNATAKA

Z11L43447



Karnataka School Examination and Assessment Board, Bengaluru



This is to certify that the below mentioned candidate has passed S.S.L.C. Examination.

ದಾಖಲೆ ಸಂಖ್ಯೆ / Register No.: 20230414292

ವರ್ಷ / Year: MARCH/APRIL - 2023

ವಿಷಯ ಮಾಧ್ಯಮ / Medium of Instruction: KANNADA

ಅಭ್ಯರ್ಥಿ ವಿಧ / Candidate Type: CCE REGULAR FRESH

ಅಭ್ಯರ್ಥಿಯ ಹೆಸರು / Candidate's Name: PRAMOD H T

ಪಿತೃ ಹೆಸರು / Father's Name: THIMMEGOWDA H N

ಮಾತೃ ಹೆಸರು / Mother's Name: VEENA

ಜನ್ಮ ದಿನಾಂಕ / Date of Birth: 21-04-2007 TWENTY-FIRST - APRIL - TWO THOUSAND SEVEN

ಲಿಂಗ / Gender: BOY

ಭಾಗ - ೧ / PART - A

ಶೈಕ್ಷಣಿಕ ವಿಷಯಗಳು SCHOLASTIC SUBJECTS	ಆಂತರಿಕ ಮೌಲ್ಯಮಾಪನ INTERNAL ASSESSMENT		ವಾಹ್ಯ ಪರೀಕ್ಷೆ EXTERNAL EXAMINATION			ಒಟ್ಟು ಅಂಕಗಳು TOTAL MARKS			ಕ್ಷೇಪ / GRADE
	ಗರಿಷ್ಠ ಅಂಕಗಳು MAX. MARKS	ಸಾಧಿಸಿದ ಅಂಕಗಳು MARKS OBTAINED	ಗರಿಷ್ಠ ಅಂಕಗಳು MAX. MARKS	ಕ್ಷೇಪ ಅಂಕಗಳು MIN. MARKS	ಸಾಧಿಸಿದ ಅಂಕಗಳು MARKS OBTAINED	ಗರಿಷ್ಠ ಅಂಕಗಳು MAX. MARKS	ಕ್ಷೇಪ ಅಂಕಗಳು MIN. MARKS	ಒಟ್ಟು ಅಂಕಗಳು TOTAL MARKS	
ಪ್ರಥಮ ಭಾಷೆ / FIRST LANGUAGE KANNADA	25	25	100	35	62	125	44	87	B
ದ್ವಿತೀಯ ಭಾಷೆ / SECOND LANGUAGE ENGLISH	20	20	80	28	58	100	35	78	B+
ತೃತೀಯ ಭಾಷೆ / THIRD LANGUAGE HINDI	20	20	80	28	56	100	35	76	B+
ಗಣಿತ / MATHEMATICS	20	20	80	28	48	100	35	68	B
ವಿಜ್ಞಾನ / SCIENCE	20	20	80	28	44	100	35	64	B
ಸಾಮಾಜಿಕ ವಿಜ್ಞಾನ / SOCIAL SCIENCE	20	20	80	28	60	100	35	80	A
ಒಟ್ಟು ಅಂಕಗಳು / TOTAL MARKS	125	125	500	175	328	625	219	453	B+

ಸಾಧಿಸಿದ ಒಟ್ಟು ಅಂಕಗಳು (ಅಕ್ಷರಗಳಲ್ಲಿ) /

TOTAL MARKS OBTAINED (IN WORDS): FOUR HUNDRED FIFTY-THREE ONLY

Percentage / ಶೇಕಡಾವಾರು: (72.48%)

ಭಾಗ - ೨ / PART - B

ಕ್ರ. ಸಂ. / Sl. No.	ಸಹ ಶೈಕ್ಷಣಿಕ ವಿಷಯಗಳು / CO-SCHOLASTIC SUBJECTS	ಕ್ಷೇಪ / GRADE	ಕ್ರ. ಸಂ. / Sl. No.	ಸಹ ಶೈಕ್ಷಣಿಕ ವಿಷಯಗಳು / CO-SCHOLASTIC SUBJECTS	ಕ್ಷೇಪ / GRADE
1.	ಶೈಕ್ಷಣಿಕ ಮತ್ತು ಆರೋಗ್ಯ ಶಿಕ್ಷಣ / PHYSICAL & HEALTH EDUCATION	A	2.	ಮನೋಭಾವ ಮತ್ತು ಮೌಲ್ಯಗಳು / ATTITUDE & VALUES	A
3.	ಕಾರ್ಯಾಣುಭವ / WORK EXPERIENCE	A	4.	ಕಲಾ ಶಿಕ್ಷಣ / ART EDUCATION	A

KARNATAKA SCHOOL EXAMINATION AND ASSESSMENT BOARD, BENGALURU

ಶಾಲಾ ಸಂಕೇತ / SCHOOL CODE: LL0137

ಶಾಲಾ ಹೆಸರು ಮತ್ತು ವಿಳಾಸ / SCHOOL NAME AND ADDRESS:

GRAMABHARATHI SARVODAYA HIGH SCHOOL

SARAPURA SHANTHIGRAM HOBLI HASSAN TALUK HASSAN
DISTRICT 573220

ದಿನಾಂಕ / DATE: 08-05-2023

ಅಧ್ಯಕ್ಷ
Chairman

23345550