



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

B I B I

Middle Name

Last Name

J A N

B. Name (as per Aadhaar)

B I B I

J A N

2. Gender (select one)

☐

Male

☒

Female

☐

Transgender

3. Date of Birth

0

1

0

1

1

9

8

3

4. Aadhaar Number

8

3

4

9

7

0

0

5

1

8

5

7

5. Residence Address

Flat/Door/Building

C

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D

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S

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B

Road/Street/Block/Sector

W

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N

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D

E

S

H

Post Office

S

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R

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G

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P

P

A

Area/Locality/Town/City

S

I

R

U

G

U

P

P

A

District

B

A

L

L

A

R

I

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5

8

3

1

2

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

4

4

8

6

8

5

5

2

0

(ii) Email ID

manforever.honey143@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

F

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R

Father's Middle Name

B

U

D

E

N

Father's Last Name

S

A

B

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	C	
	(iii) Range Code	4	2	1	(iv) AO No.	9	1

[illegible]

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

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

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

a. I,**BIBI JAN**....., in the capacity of**HIMSELF**.....(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.**BALLARI**

Date.. **10/08/2026**

Designation: **AUTHORIZED PERSON**



ಭಾರತೀಯ ವಿಕಿರಣ ಗುರುತು ಪಾಠಿಕಾಂಶ

ಭಾರತ ಸರ್ಕಾರ

Unique Identification Authority of India

Government of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ/ Enrolment No.: 0654/11160/02699

Download Date: 08/08/2018

To
ಬಿಬಿ ಜಾನ್
Bibi Jan
W/O: Abdul Ro
Ward Number 2
Near deshuru Road
Siruguppa
Siruguppa
Bellary Karnataka - 583121
9448685520

Generation Date: 18/07/2018

Signature valid

Digitally signed by Bibi Jan
DN: cn=Bibi Jan, o=UAE, ou=UAE, email=Bibi Jan, c=IN
Date: 2018.07.18 11:00:04
+05'30'



QR Code with Privacy

ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

8349 7005 1857

VID : 9116 4063 2890 7645

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ

Government of India



ಬಿಬಿ ಜಾನ್
Bibi Jan
ಜನ್ಮ ದಿನಾಂಕ/DOB: 01/01/1983
♀ FEMALE

8349 7005 1857

VID : 9116 4063 2890 7645

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

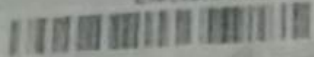




ಭಾರತ ಚುನಾವಣಾ ಆಯೋಗ
ELECTION COMMISSION OF INDIA

ಮತದಾರರ ಫೋಟೋ ಗುರುತಿನ ಕಾರ್ಡ್

Elector's Photo Identity Card



NNJ2855708



ಹೆಸರು : ಬೀಬಿ ಜಾನ್

Name : Bibi Jan

ಗಂಡನ ಹೆಸರು : ಸೈಯದ ಅಬ್ದುಲ್ ರೋಫ್

ರೋಫ್

Husband's Name : Saiyad Abdul Roph

ಲಿಂಗ/Gender :

ಮಹಿಳೆ / Female

ಜನ್ಮ ದಿನಾಂಕ/ವಯಸ್ಸು

01-01-1983

Date of Birth/ Age

ವಿಳಾಸ : 81, ಸಿಂಧನೂರು, ರಾಚೂರು

Address : 81, SINDHUR, RAICHUR

ದಿನಾಂಕ/ Date : 13-07-2020

ಮತದಾರರ ನೋಂದಣಾಧಿಕಾರಿ

Electoral Registration Officer

ವಿಧಾನ ಸಭಾ ಕ್ಷೇತ್ರದ ಪಂಚಾಯತ್ ಮತ್ತು ಹೆಸರು : 58-ಸಿಂಧನೂರು

Assembly Constituency No. and Name : 58-Sindhaur

ಭಾಗದ ಪಂಚಾಯತ್ ಮತ್ತು ಹೆಸರು : 192-ಪಶ್ಚಿಮ ಉಪ-ವಿಂಗ್ ಹೈಸ್ಕೂಲ್

Part No. and Name : 192-GOVT COMPOSITE HIGH SCHOOL WEST WING DHADESUGUR

Part No. and Name : 192-GOVT COMPOSITE HIGH SCHOOL WEST WING DHADESUGUR

Note 1 : Mere possession of this card is no guarantee that you are elector in the current electoral roll. Please check your name in the current electoral roll before every election.
Note 2 : Date of Birth mentioned in this card shall not be treated as a proof of age/ D.O.B for any purpose other than registration in electoral roll.