



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

S H I L P A

Middle Name

Last Name

H I R E M A T H

B. Name (as per Aadhaar)

S H I L P A

H I R E M A T H

2. Gender (select one)

Tick

Male

Tick

Female

Tick

Transgender

3. Date of Birth

0 5

0 5

1 9 9 5

4. Aadhaar Number

3 0 3 2 2 9 9 7 3 5 0 9

5. Residence Address

Flat/Door/Building

0 0

Road/Street/Block/Sector

1 1 T H

W A R D

R A J I V

G A N D I

N A G

Post Office

S I R U G U 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)

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

7 6 7 6 9 4 4 0 4

(ii) Email ID

MANJUSGP2025@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

P R A B H A Y Y 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	C	
	(iii) Range Code	4	2	1	(iv) AO No.	9	1

[illegible]

18. Permanent Account Number (if any)

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[illegible]

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

21. Contact Details									
(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

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

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a. I, **SHILPA HIREMATH**, 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..20/08/2026



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

Name: **SHILPA HIREMATH**

Designation: **AUTHORIZED PERSON**

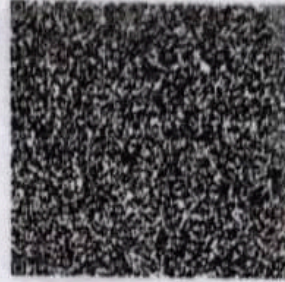


ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ/ Enrolment No.: 0821/90600/00041

To
ಶಿಲಾ ಹಿರೇಮಠ
Shilpa Hiremath
C/O M Siddalingayyaswami
#00
11th ward
Rajiv Gandhi nagar
siruguppa
Siruguppa
Bellary Karnataka - 583121
7676944404



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

3032 2997 3509

VID : 9121 1521 5757 4858

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India



ಶಿಲಾ ಹಿರೇಮಠ
Shilpa Hiremath
ಜನನ ದಿನಾಂಕ/DOB: 05/05/1995
♀/FEMALE

Issue Date: 27/09/2013

3032 2997 3509

VID : 9121 1521 5757 4858

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



S.V.M.V.V.SANGHA'S,
SHRI VIJAYMAHANTESH ARTS AND COMMERCE WOMEN'S
PU COLLEGE, ILKAL.

ಪ್ರಮಾಣ ಪತ್ರ CERTIFICATE

ಈ ಕೆಳಗೆ ನಮೂದಿಸಿದ ಅಭ್ಯರ್ಥಿನಿಯು ಪದವಿ ಪ್ರವೇಶ ಪರೀಕ್ಷೆಯ ಪ್ರಥಮ ವರ್ಷದ ಪರೀಕ್ಷೆಯಲ್ಲಿ ಕೆಳಗಿನ ವಿವರಗಳೊಂದಿಗೆ ಕೆಳಗಿನಂತಿರುವಂತೆ ಎಂದು ಪ್ರಮಾಣೀಕರಿಸಲಾಗಿದೆ.

This is to certify that the candidate mentioned below has passed the First Year Pre University Examination with the following details.

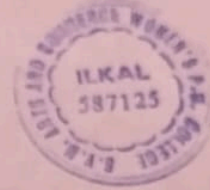
ಅಭ್ಯರ್ಥಿನಿಯ ಹೆಸರು
Name of the Candidate } **SHILPA HIREMATH**

ತಂದೆಯ ಹೆಸರು
Father's Name } **PRABHAYYA**

ತಾಯಿಯ ಹೆಸರು
Mother's Name } **MANJULA**

ನೋಂದಣಿ ಸಂಖ್ಯೆ
Student No. }

ರೋಲ ಸಂಖ್ಯೆ
Roll No. } **80**



ವಿಷಯಗಳು Subjects	ಅಂಕಗಳು Marks		ಅಂಕಗಳು ಅಕ್ಷರದಲ್ಲಿ Marks In Words
	ಗರಿಷ್ಠ Max	ಪಡೆದ ಅಂಕಗಳು Marks Obtained	
Part-I Languages			
Kannada (01)	100	50	FIVE - ZERO
English (02)	100	35	THREE - FIVE
Part-II Optionals			
History (21)	100	30	THREE - ZERO
Sociology (28)	100	52	FIVE - TWO
Political Science (29)	100	35	THREE - FIVE
Education (52)	100	35	THREE - FIVE
ಒಟ್ಟು ಅಂಕಗಳು Total	600	237	TWO-THREE-SEVEN

ಪ್ರತಿಶತ ಅಂಕಗಳು Percentage of Marks **39.50 %** ಪಡೆದ ದರ್ಜೆ Class Obtained **PASS CLASS**

ಫಲಿತಾಂಶದ ದಿನಾಂಕ
Date of Result } **27-04-2012**

ಅಭ್ಯರ್ಥಿನಿಯ ಸಹಿ
Signature of the Candidate

ಸಹಿ
Co-vener

ಪ್ರಾಚಾರ್ಯರು
Principal
587125 EB-096