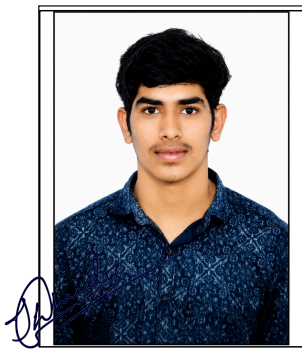




FORM NO. 93

[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

D E V A N O O R A

Middle Name

Last Name

K H A D A R A V A L I

B. Name (as per Aadhaar)

D E V A N O O R A K H A D A R A V A L I

2. Gender (select one)



Male



Female



Transgender

3. Date of Birth

0

9

0

4

2

0

0

6

4. Aadhaar Number

7

3

5

7

4

8

5

0

3

4

5

7

5. Residence Address

Flat/Door/Building

W A R D N O 6

Road/Street/Block/Sector

K A R N A T A K A O N E C E N T E R N E A

Post Office

T E K K A L K O T E

Area/Locality/Town/City

B E L L A R Y

District

B A L L A R I

State/Union Territory

K A R N A T A K A

Country/Region

I N D I A

PIN / ZIP CODE

5 8 3 1 2 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)



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

8

4

9

6

8

6

9

5

7

8

(ii) Email ID

k1ranganathn@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

M A B U

Father's Middle Name

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][illegible][illegible][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

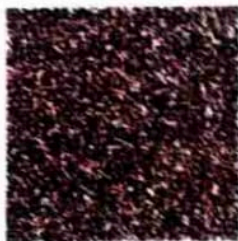
24. Documents submitted as Proof of Identity, Proof of Address of Representative Assessee

Designation: **AUTHORIZED PERSON**



ಭಾರತೀಯ ವಿಕಿಷ್ಠ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

To
Devanagara Khadaravali
S/O: Mabu Sab,
Ward No 6,
Near Mahaboob Subhani Darga,
Tekkalakote,
VTC: Halekote,
PO: Tekkalakota,
Sub District: Siruguppa,
District: Bellary,
State: Karnataka,
PIN Code: 583122,
Mobile: 8496869578



ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



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).

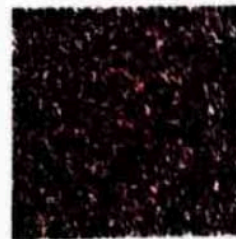
ನನ್ನ ಆದಾರ್, ನನ್ನ ಗುರುತು



■ Entities seeking Aadhaar are obligated to seek consent.



Address:
S/O: Mabu Sab, Ward No 6, Near Mehaboob
Subhani Darga, Tekkalakote, Halekote, PO:
Tekkalakote, DIST: Bellary,
Karnataka - 583122



VID : 9133 8006 6548 5819

www.usaid.gov



Name/ ಹೆಸರು

Devanoora Khadaravali

ದೇವನೂರ್ ಖಾದರವಲಿ

Abha Number/ ಅಭಾ ಸಂಖ್ಯೆ

91-4460-6225-2338

Abha Address/ ಅಭಾ ವಿಳಾಸ

khadaravali_90909@abdm



Gender/ ಲಿಂಗ
Male / ಗಂಡು

Date Of Birth/ ಹುಟ್ಟಿದ ದಿನಾಂಕ
09-04-2006

Mobile/ ಮೊಬೈಲ್
8496869578

Instructions

Toll-Free Number: 1800 114 477

- With this ABHA you have become a part of India's digital health ecosystem.
इस आभा के साथ आप भारत के डिजिटल हेल्थ इकोसिस्टम का हिस्सा बन गए हैं।
- ABHA provides you a unique identification and helps in storing - safekeeping all your digital health records at one place.
आभा आपको एक विशिष्ट पहचान प्रदान करता है और आपके सभी डिजिटल स्वास्थ्य रिकॉर्ड को सुरक्षित एक ही स्थान पर संग्रहीत रखने में मदद करता है।
- You can download the ABHA mobile app, Aarogya Setu or other ABDM enabled app to view and share your digital health records with ABDM registered healthcare service providers.
आप एबीडीएम पंजीकृत स्वास्थ्य सेवा प्रदाताओं के साथ अपने डिजिटल स्वास्थ्य रिकॉर्ड देखने और साझा करने के लिए आभा मोबाइल ऐप, आरोग्य सेतु या अन्य एबीडीएम सक्षम ऐप डाउनलोड कर सकते हैं।
- If this card is lost kindly download it from www.abha.abdm.gov.in, it is digitally acceptable.
यदि यह कार्ड खो जाता है तो कृपया इसे www.abha.abdm.gov.in से डाउनलोड करें, यह डिजिटल रूप से स्वीकार्य है।