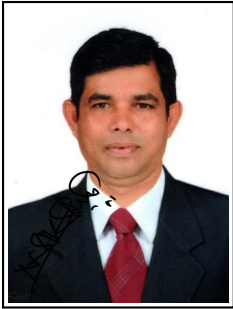


Request For Changes Or Correction in PAN Data [For an Individual]



Permanent Account Number (PAN)

C P N P S 8 1 6 4 R

Aadhaar Number

5 4 4 3 7 1 3 2 0 4 7 0

Sr. No.

Tick
Box

PART A - Personal Information

1. ☒ A. Name

First Name

S U R E S H

Middle Name

Last Name

S H E T T Y

☒ B. Name (as per Aadhaar)

S U R E S H

S H E T T Y

2. ☐ Gender (select one)☒

Male

☐

Female

☐

Transgender

3. ☒ Date of Birth

0 1

0 5

1 9

7 9

4. ☒ Address☒

Residence

☐

Office

(select one)

Flat/Door/Building

3

-

3 1

S H

I V

A N

I K

E T

H A

N A

Road/Street/Block/Sector

M

A N

J O

T T

Y

Post Office

P

E R

M A

N U

P O

S T

Area/Locality/Town/City

B

E L

T H

A N

G A

D Y

District

D

A K

S H

I N

A

K A

N N

A D

A

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5 7

4 2

1 4

5. ☐ Passport Number6. ☐ Taxpayer Identification Number in the Country of Residence7. ☒ Contact Details

(i) Mobile Number

Country Code

9 1

Mobile Number

9 6

8 6

1 4

4 5

3 7

(ii) Email ID

cscvinayaka@gmail.com

(iii) Landline No. with Country/ISD Code
and Area/STD Code (if any)

Country/ISD Code

Area/STD Code

Landline Number

PART B - Details of Parents

8. ☐ Father's First Name

V

I S

H W

A N

A T

H

Father's Middle Name

Father's Last Name

S

H E

T T

Y

9. ☐ Mother's First Name

Mother's Middle Name

Mother's Last Name

S

H E

T T

Y

10. Name of parent to be printed on Permanent Account Number card (select one)

☒

Father

☐

Mother

Part C: Declaration by Applicant or by Representative Assessee on behalf of the Applicant

11. Documents submitted as Proof of Identity, Proof of Address, Proof of Date of Birth of the Applicant & Proof of Change in support of proposed changes / corrections requested by the Applicant

☒

(i) Proof of Identity

☒

(ii) Proof of Address

☒

(iii) Proof of Date of Birth

☒

(iv) Documentay proof in support of other changes

☒

(v) Copy of PAN

Verification & Declaration

a. I, ...**SURESH SHETTY**....., in the capacity of**SELF**.....(Self/Representative Assessee) do hereby declare that what is stated above is true to the best of my knowledge and belief.

Place.....**DAKSHINA KANNADA**

Date.....**04/07/2026**



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

← SURE1979.pdf

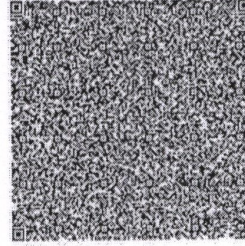


ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ/ Enrolment No.: 4050/50048/19168

To
ಸುರೇಶ್ ಶೆಟ್ಟಿ
Suresh Shetty
S/O: Late Vishwanath Shetty,
#3-31, Shivanlikethana,
Manjotty,
VTC: Nada,
PO: Peramu,
Sub District: Belthangady,
District: Dakshina Kannada,
State: Karnataka,
PIN Code: 574214
Mobile: 9686144537

Signature Not Verified
Digitally signed by Unique
Identification Authority of India
DN
Date: 2026.08.09 15:58:55
IST



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

5443 7132 0470

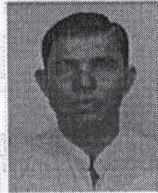
VID : 9103 3094 2495 2748

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India

Aadhaar no. Issued: 24/04/2013



ಸುರೇಶ್ ಶೆಟ್ಟಿ
Suresh Shetty
ಜನ್ಮ ದಿನಾಂಕ/DOB: 01/05/1979
ಪುರುಷ/ MALE

ಆಧಾರ್ ಗುರುತಿನ ಪ್ರಮಾಣವಾಗಿದೆ, ಪೌರತ್ವ ಅಥವಾ ಜನ್ಮ ದಿನಾಂಕದ ಪ್ರಮಾಣವಲ್ಲ. ಇದನ್ನು ಆನ್‌ಲೈನ್ ದೃಢೀಕರಣ ಅಥವಾ QR ಕೋಡ್ / ಆಫ್‌ಲೈನ್ XML ಸ್ಕ್ಯಾನ್‌ನೊಂದಿಗೆ ಮಾತ್ರ ಬಳಸಬೇಕು.

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)

5443 7132 0470

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

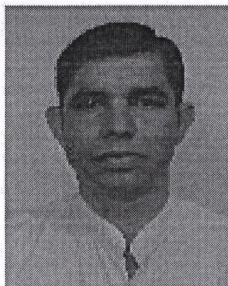
Details as on: 09/06/2026
S/
S/
M
K
K



**national
health
authority**

Ayushman Bharat Health Account (ABHA)

आयुष्मान भारत स्वास्थ्य खाता (आभा)



Name/ ಹೆಸರು

Suresh Shetty

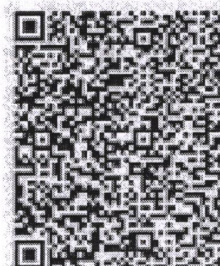
ಸುರೇಶ್ ಶೆಟ್ಟಿ

Abha Number/ ಅಭಾ ಸಂಖ್ಯೆ

48-2300-1062-6122

Abha Address/ ಅಭಾ ವಿಳಾಸ

48230010626122@abdm



Gender/ ಲಿಂಗ

Male / ಗಂಡು

Date Of Birth/ ಹುಟ್ಟಿದ ದಿನಾಂಕ

01-05-1979

Mobile/ ಮೊಬೈಲ್

9686144537



**national
health
authority**

Ayushman Bharat Health Account (ABHA)

आयुष्मान भारत स्वास्थ्य खाता (आभा)

Instructions

Toll-Free Number: 1800 114

- 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 at one place.
आभा आपको एक विशिष्ट पहचान प्रदान करता है और आपके सभी डिजिटल स्वास्थ्य रिकॉर्ड को सुरक्षित एक ही स्थान पर संग्रहीत मदद करता है।
- You can download the ABHA mobile app, Aarogya Setu or other ABDM enabled app to view and share 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, 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।

आयकर विभाग

INCOME TAX DEPARTMENT

SURESH SHETTY

VISHWANATHA SHETTY

01/05/1979

Permanent Account Number

CPNPS8164R


Signature



भारत सरकार

GOVT. OF INDIA

9088
11
80679

In case this card is lost / found, kindly inform / return to
Income Tax PAN Services Unit, UTITSL
Plot No. 3, Sector 11, CBD Belapur,
Navi Mumbai - 400 614.

इस कार्ड को खोने/पाने पर कृपया सूचित करें/वापस
आयकर पैन सेवायूनिट - UTITSL
प्लॉट नं. 3, सेक्टर 11, सीबीडी बेलपुर,
नवी मुंबई - 400 614