

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

Permanent Account Number (PAN)

B D B P N 3 7 2 9 G

Aadhaar Number

4 9 4 9 6 4 0 1 8 3 6 4

Sr. No.

Tick
Box

PART A - Personal Information

1. ☒ A. Name

First Name

Middle Name

Last Name

.
N E E L A V A T H I☒ B. Name (as per Aadhaar)

N E E L A V A T H I

2. ☐ Gender (select one)☐

Male

☒

Female

☐

Transgender

3. ☐ Date of Birth

1 0

0 3

1 9 8 5

4. ☒ Address☒

Residence

☐

Office

(select one)

Flat/Door/Building

Road/Street/Block/Sector

Post Office

Area/Locality/Town/City

District

C / O K A R I A I A H
K A T T A Y A H O B L I
A G I L E
C H I K K A B A G A N A H A L L I
H A S S A N

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5 7 3 1 2 8

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

(i) Mobile Number

Country Code

9 1

Mobile Number

7 3 3 7 6 8 8 8 1 3

(ii) Email ID

hamamatha63@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

Father's Middle Name

Father's Last Name

K A R I A I A H

9. ☐ Mother's First Name

Mother's Middle Name

Mother's Last Name

E R A M M A

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,**NEELAVATHI**....., 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.....**HASSAN**

Date.....**17/07/2026**



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



ಭಾರತ ಸರ್ಕಾರ
Government of India



ನೀಲಾವತಿ
Neelavathi
ಜನ ದಿನಾಂಕ/DOB: 10/03/1985
ಸ್ತ್ರೀ/FEMALE



4949 6401 8364

ನನ್ನ ಆಧಾರ್. ನನ್ನ ಗುರುತು



ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ

Unique Identification Authority of India

Address:

W/O Puttaswamy,
Chikkabaganahalli Village, Agile
Post, Hassan Taluk and District,
Kattaya Hobali,
Chikkabaganahalli, Hassan,
Karnataka - 573128

ವಿಳಾಸ:

W/O ಪುಟ್ಟಸ್ವಾಮಿ, ಚಿಕ್ಕಬಾಗನಹಳ್ಳಿ ಗ್ರಾಮ,
ಆಗಿಲೆ ಆಂಪೆ, ಹಾಸನ ತಾಲ್ಲೂಕು ಮತ್ತು ಜಿಲ್ಲೆ,
ಕಟ್ಟಾಯ ಹೋಬಳಿ, ಚಿಕ್ಕಬಾಗನಹಳ್ಳಿ, ಹಾಸನ,
ಕರ್ನಾಟಕ - 573128

4949 6401 8364



help@uidai.gov.in



www.uidai.gov.in



Name/ ಹೆಸರು

Neelavathi

ನೀಲಾವತಿ

Abha Number/ ಅಭಾ ಸಂಖ್ಯೆ

91-3644-3202-0865

Abha Address/ ಅಭಾ ವಿಳಾಸ

neelavathi2171@abdm



Gender/ ಲಿಂಗ
Female / ಹೆಣ್ಣು

Date Of Birth/ ಹುಟ್ಟಿದ ದಿನಾಂಕ
10-03-1985

Mobile/ ಮೊಬೈಲ್
7337688813

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।

आयकर विभाग

INCOME TAX DEPARTMENT

NILAVATHI

KARIAIAH

10/03/1985

Permanent Account Number

BDBPN3729G

सहस्र

Signature



भारत सरकार

GOVT. OF INDIA



26112016

इस कार्ड के खोने/पाने पर कृपया सूचित करें/लौटारें:

आयकर पैन सेवा इकाई, एन एस डी एल
5 वीं मंजिल, मंत्री स्टर्लिंग,
प्लॉट नं. 341, सर्वे नं. 997/8,
मॉडल कालोनी, दीप बंगला चौक के पास,
पुणे - 411 016.

*If this card is lost / someone's lost card is found,
please inform / return to :*

Income Tax PAN Services Unit, NSDL
5th Floor, Mantri Sterling,
Plot No. 341, Survey No. 997/8,
Model Colony, Near Deep Bungalow Chowk,
Pune - 411 016.

Tel: 91-20-2721 8080, Fax: 91-20-2721 8081
e-mail: tininfo@nsdl.co.in