

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



Permanent Account Number (PAN)

B W F P N 5 3 4 4 A

Aadhaar Number

2 8 5 5 2 3 5 4 7 2 2 6

Sr. No.

Tick
Box

PART A - Personal Information

1. ☐ A. Name

First Name

Middle Name

Last Name

N A G A M M A

☐ B. Name (as per Aadhaar)

N A G A M M A

2. ☐ Gender (select one)☐

Male

☒

Female

☐

Transgender

3. ☐ Date of Birth

0 1

0 1

1 9 8 3

4. ☒ Address☒

Residence

☐

Office

(select one)

Flat/Door/Building

W / O N A G A R A J

Road/Street/Block/Sector

Post Office

S H A N T H I G R A M A

Area/Locality/Town/City

S H A N T H I G R A M A

District

H A S S A N

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5 7 3 2 2 0

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

(i) Mobile Number

Country Code

9 1

Mobile Number

7 2 0 4 9 3 3 4 7 7

(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

V E N K A T A I A H

9. ☐ Mother's First Name

Mother's Middle Name

Mother's Last Name

M A H A D E V 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,**NAGAMMA**....., 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.....**03/07/2026**

ನಗಮ್

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



ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ/ Enrolment No.: 4064/35023/00116

To
ನಾಗಮ್ಮ
Nagamma
C/O: Nagaraj,
VTC: Shanthigrama,
PO: Shanthigrama,
Sub District: Alur,
District: Hasan,
State: Karnataka,
PIN Code: 573220,
Mobile: 7204933477

Signature valid

Digitally signed by Unique
Identification Authority of India
01
Date: 2020.01.17 17:34:25
IST



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

2855 2354 7226

VID : 9121 1977 1702 8925

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India

Aadhaar no. issued: 28/01/2014



ನಾಗಮ್ಮ
Nagamma
ಜನ್ಮ ದಿನಾಂಕ/DOB: 01/01/1983
ಸ್ತ್ರೀ/FEMALE

ಆಧಾರ್ ಗುರುತಿನ ಪುರಾವೆಯಾಗಿದೆ, ಪೌರತ್ವ ಅಥವಾ ಜನ್ಮ ದಿನಾಂಕದ ಪುರಾವೆ
ಅಲ್ಲ. ಇದನ್ನು ಆನ್‌ಲೈನ್ ದೃಢೀಕರಣ ಅಥವಾ QR ಕೋಡ್ / ಆಫ್‌ಲೈನ್ XML
ಸಾಕ್ಷಿ ನಿರ್ಗಮನದ ಮೂಲಕ 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)

2855 2354 7226

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

**Name/ ಹೆಸರು****Nagamma****ನಾಗಮ್ಮ****Abha Number/ ಅಭಾ ಸಂಖ್ಯೆ****91-2461-7183-6058****Abha Address/ ಅಭಾ ವಿಳಾಸ****nagamma5093@abdm****Gender/ ಲಿಂಗ**
Female / ಹೆಣ್ಣು**Date Of Birth/ ಹುಟ್ಟಿದ ದಿನಾಂಕ**
01-01-1983**Mobile/ ಮೊಬೈಲ್**
7204933477**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।

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

आयकर पैन सेवा इकाई, एन एस डी एल
चौथी मंजिल, मंत्री स्टर्लिंग,
प्लॉट नं. 341, सर्वे नं. 997/8,
मॉडल कॉलोनी, 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
4th 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: tninfo@nsdl.co.in

आयकर विभाग
INCOME TAX DEPARTMENT

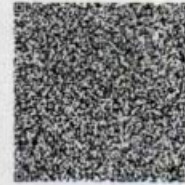


भारत सरकार
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड
Permanent Account Number Card

BWFPN5344A



नाम / Name
NAGAMMA

पिता का नाम / Father's Name
VENKATAIAH

जन्म की तारीख /
Date of Birth
01/01/1983


हस्ताक्षर / Signature

05022019