

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

Permanent Account Number (PAN)

H D P P R 9 4 2 3 H

Aadhaar Number

4 0 1 9 6 5 1 3 4 6 0 0

Sr. No.

Tick
Box

PART A - Personal Information

1. ☒ A. Name

First Name

H E M A L A T H A

Middle Name

T E J U R

Last Name

R A V I K U M A R A

☒ B. Name (as per Aadhaar)

H E M A L A T H A T R

2. ☐ Gender (select one)☐

Male

☒

Female

☐

Transgender

3. ☒ Date of Birth

2

9

0

5

2

0

0

8

4. ☒ Address☒

Residence

☐

Office

(select one)

Flat/Door/Building

C / O R A V I K U M A R A T R

Road/Street/Block/Sector

K A S A B A H O B A L I

Post Office

T E J U R

Area/Locality/Town/City

A L U R

District

H A S S A N

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5

7

3

2

1

9

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

(i) Mobile Number

Country Code

9

1

Mobile Number

9

0

0

8

1

8

1

9

9

0

(ii) Email ID

colorsnetwork@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

R A V I K U M A R A

Father's Middle Name

T E J U R

Father's Last Name

R A N G E G O W D A

9. ☐ Mother's First Name

A N U P A M A

Mother's Middle Name

G O W D A L L I

Mother's Last Name

R A M A P P A G O W D 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, ...**HEMALATHA TEJUR RAVIKUMARA**....., 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.....**20/07/2026**

A rectangular box containing a handwritten signature in black ink. The signature is written in a cursive style and reads "Hemalatha T.R".

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



भारत सरकार
भारत सरकार



आधार

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ

ಭಾರತ ಸರ್ಕಾರ

Unique Identification Authority of India
Government of India

ನೋಂದಾವಣೆ ಕ್ರಮ ಸಂಖ್ಯೆ / Enrollment No.: 0129/22240/05522

09/05/2014

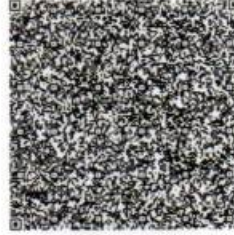
To,
ಹೇಮಲತಾ ಟಿ ಆರ್
Hemalatha T R
C/O Ravikumara T R

Kasaba Hobali
Hassan Taluk Tejur
Tejur Alur Hassan
Karnataka 573219
9008181990

Ref: 2343 / 13U / 91212 / 91216 / P



SB014567652FH



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

4019 6513 4600

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



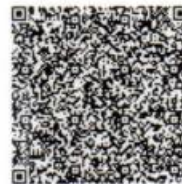
ಭಾರತ ಸರ್ಕಾರ

Government of India



ಹೇಮಲತಾ ಟಿ ಆರ್
Hemalatha T R

ಜನ್ಮ ದಿನಾಂಕ / DOB : 29/05/2008
ಸ್ತ್ರೀ / Female



4019 6513 4600

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24349768

आयकर विभाग
INCOME TAX DEPARTMENT

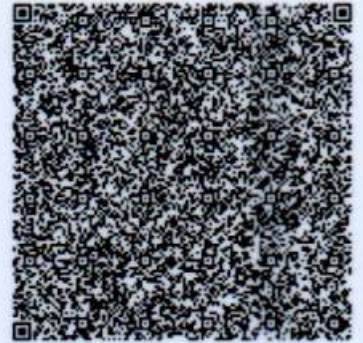


भारत सरकार
GOVT. OF INDIA

MINOR

स्थायी लेखा संख्या कार्ड
Permanent Account Number Card

HDPPR9423H



नाम / Name

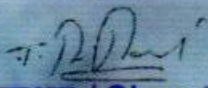
HEMALATHA T R

पिता का नाम / Father's Name

RAVIKUMARA TEJUR RANGEGOWDA

जन्म की तारीख / Date of Birth

29/05/2008


हस्ताक्षर / Signature

18582