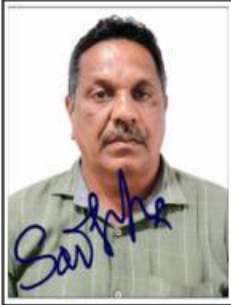


Request For Changes Or Correction in PAN Data  
[For an Individual]

Permanent Account Number (PAN)

B O B P S 9 0 9 1 F

Aadhaar Number

3 1 3 5 3 8 4 1 0 9 3 1

Sr. No.

Tick  
Box

## PART A - Personal Information

1. ☒ A. Name

First Name

Middle Name

Last Name

S A N T H O S H

☒ B. Name (as per Aadhaar)

S A N T H O S H

2. ☐ Gender (select one)☒

Male

☐

Female

☐

Transgender

3. ☐ Date of Birth

2

2

0

4

1

9

7

6

4. ☒ Address☒

Residence

☐

Office

(select one)

Flat/Door/Building

H I G 2 2

Road/Street/Block/Sector

1 8 T H C R O S S

Post Office

H A S S A N

Area/Locality/Town/City

K U V E M P U N A G A R A

District

H A S S A N

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5 7 3 2 0 1

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

(i) Mobile Number

Country Code

9

1

Mobile Number

9

4

8

0

7

9

9

4

5

8

(ii) Email ID

smksevakendra@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

S U R E N D R A

9. ☐ Mother's First Name

Mother's Middle Name

Mother's Last Name

S H O B H 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 &amp; 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, ...**SANTHOSH**....., 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**



(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.: 0707/10013/03539

To  
ಸಂತೋಷ  
Santhosh  
S/O: Surendra  
HIG 22  
18th Cross  
Kuvempu Nagara  
Hassan  
Hassan Karnataka - 573201  
9480799458



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

3135 3841 0931

VID : 9102 6286 1877 4381

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ  
Government of India



ಸಂತೋಷ  
Santhosh  
ಜನನ ದಿನಾಂಕ/DOB: 22/04/1976  
ಪುರುಷ/ MALE

Issue Date: 14/02/2015

3135 3841 0931

VID : 9102 6286 1877 4381

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



सत्यमेव जयते

**Indian Union Driving Licence**  
**Issued by Transport Department, Government of KARNATAKA**

KA

**KA13 19960004143**

Issue Date    Validity(NT)    Validity (TR)\*  
13-12-1996    21-04-2036    14-03-2032



Holder's Signature

Name: **SANTHOSH**

Date of Birth: 22-04-1976    Blood Group: AB+    Organ Donor: N  
Son / Daughter / Wife of: SURENDARA

Address: H I G 22, KUVEMPU NAGAR HASSAN 573201

Date of First Issue (26-03-2026)



DL No : KA13 19960004143

DTA04757865



Invalid Carriages (Regn. Numbers)\*

Hazardous Validity\* Hill Validity\*

| Class of Vehicle | Code  | Issued by | Date of Issue | Vehicle Category | Badge* Number | Badge* Issued Date | Badge* Issued by |
|------------------|-------|-----------|---------------|------------------|---------------|--------------------|------------------|
|                  | LMV   | KA13      | 13-12-1996    | NT               |               |                    |                  |
|                  | TRANS | KA13      | 24-03-2001    | TR               |               |                    |                  |
|                  |       |           |               |                  |               |                    |                  |
|                  |       |           |               |                  |               |                    |                  |
|                  |       |           |               |                  |               |                    |                  |
|                  |       |           |               |                  |               |                    |                  |

Emergency Contact Number

Licensing Authority  
HASSAN RTO

Form 7 Rule 16(2)

आयकर विभाग

INCOME TAX DEPARTMENT



भारत सरकार

GOVT. OF INDIA

H S SANTHOSH

SURENDRA

22/04/1976

Permanent Account Number

BOBPS9091F

H. S. Santhosh

Signature



13092007