

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

Permanent Account Number (PAN)

D A O P M 4 6 0 3 L

Aadhaar Number

9 0 4 8 8 1 1 2 4 1 9 9

Sr. No.

Tick
Box

PART A - Personal Information

1. ☒ A. Name

First Name

M A L L I K A R J U N A

Middle Name

C H O W D E N A H A L L I

Last Name

K A L L E G O W D A

☒ B. Name (as per Aadhaar)

M A L L I K A R J U N A C K

2. ☐ Gender (select one)☒

Male

☐

Female

☐

Transgender

3. ☐ Date of Birth

0 2

0 5

1 9 7 6

4. ☒ Address☒

Residence

☐

Office

(select one)

Flat/Door/Building

C / O K A L L E G O W D A C M

Road/Street/Block/Sector

C H O W D E N A H A L L I V I L L A G E

Post Office

Y A L A G U N D A P O S T

Area/Locality/Town/City

S A L A G A M E H O B L I

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 6 1 1 4 1 6 3 0 4

(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

K A L L E G O W D A

Father's Middle Name

C H O W D E N A H A L L I

Father's Last Name

M A L L E G O W D A

9. ☐ Mother's First Name

Mother's Middle Name

Mother's Last Name

M A L L I G E 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, ... **MALLIKARJUNA CHOWDENAHALLI KALLEGOWDA** 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..... **23/07/2026**

A rectangular box containing a handwritten signature in blue ink that reads "C.K. Malapa".

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



ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ

ಭಾರತ ಸರ್ಕಾರ

Unique Identification Authority of India
Government of India

ನೋಂದಾವಣೆ ಕ್ರಮ ಸಂಖ್ಯೆ / Enrollment No.: 1320/16066/05796

To
ಮಲ್ಲಿಕಾರ್ಜುನ ಸಿ ಕೆ
Mallikarjuna C K
S/O: Kallegowda C M
Hassan Taluk Salagame Hobli
Chowdenahalli
Yelagunda
Alur Hasan
Karnataka 573219
9611416304

12/01/2016
328483088



MA284830889FT



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

9048 8112 4199

ಆಧಾರ್ - ಶ್ರೀಸಾಮಾನ್ಯನ ಅಧಿಕಾರ



ಭಾರತ ಸರ್ಕಾರ

Government of India



ಮಲ್ಲಿಕಾರ್ಜುನ ಸಿ ಕೆ
Mallikarjuna C K
ಜನ್ಮ ದಿನಾಂಕ / DOB : 02/05/1976
ಪುರುಷ / Male



9048 8112 4199

ಆಧಾರ್ - ಶ್ರೀಸಾಮಾನ್ಯನ ಅಧಿಕಾರ

DL No. : KA13 20130007382
NAME : MALLIKARJUNA C K
D.O.B : 02/05/1976
VALID TILL : 01/05/2026(NT)

DOI : 16/08/2013

FORM - 7
[See Rule 16(2)]

B.G. :



VALID THROUGHOUT INDIA
COV: MCWG 16/08/2013

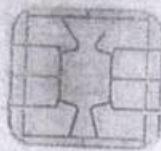
S/o : KALLE GOWDA
ADDRESS : CHOWDENAHALLY (V) HASSAN DIST
SPANDANA M D S) 573201


Sign. Of Holder

Sign. Licencing Authority
HASSAN (KA13)

CDOL: 20/08/2013

ಕರ್ನಾಟಕ ರಾಜ್ಯ KARNATAKA STATE
INDIAN UNION MOTOR DRIVING LICENCE



ಪಾರಿಗ್ ಇಲಾಖೆ
TRANSPORT DEPARTMENT



आयकर विभाग
INCOME TAX DEPARTMENT



भारत सरकार
GOVT. OF INDIA

MALLIKARJUN C K

CHOWDENAHALI MALLEGOWDA
KALLEGOWDA
02/05/1976

Permanent Account Number

DAOPM4603L

C.K. Mallikarjun
Signature

