PAN CR-01

Request For Changes Or Correction in PAN Data

[For an Individual]

Permanent Account Number (PAN)
A M W P L 4 6 0 6 K

Aadhaar Number
8 9 2 0 8 8 1 8 3 2 3 7

Sr. No.	Tick Box	PART A - Personal Information

1. A. Name — Tick

First Name	L A T H A
Middle Name	H A S S A N
Last Name	S O M A S H E T T Y

B. Name *(as per Aadhaar)* — Tick

L A T H A H S

2. Gender *(select one)* — Tick Male ☑ Female Tick Transgender

3. Date of Birth ☑ — 1 4 / 1 0 / 1 9 8 1

4. Address ☑

Tick ☑ Residence Tick Office *(select one)*

Flat/Door/Building	N O . 4
Road/Street/Block/Sector	G A N G I R A N A B E A D N E A R N I V E D I
Post Office	H A S S A N
Area/Locality/Town/City	H A S S A N
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 Number — Tick

6. Taxpayer Identification Number in the Country of Residence — Tick

7. Contact Details ☑

(i) Mobile Number	Country Code	9 1 — Mobile Number: 8 9 0 4 5 2 8 4 7 6
(ii) Email ID		lathahs1081@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 — Tick	
Father's Middle Name	
Father's Last Name	S W A M Y S H E T T Y
9. Mother's First Name — Tick	
Mother's Middle Name	
Mother's Last Name	K A L A M M A

10. Name of parent to be printed on Permanent Account Number card *(select one)* ☑ Father Tick 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

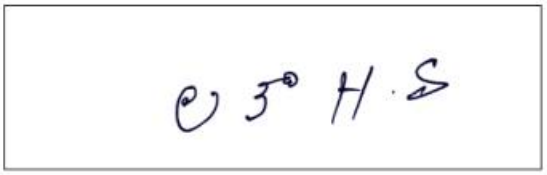
☑ (iv) Documentay proof in support of other changes ☑ (v) Copy of PAN

Verification & Declaration

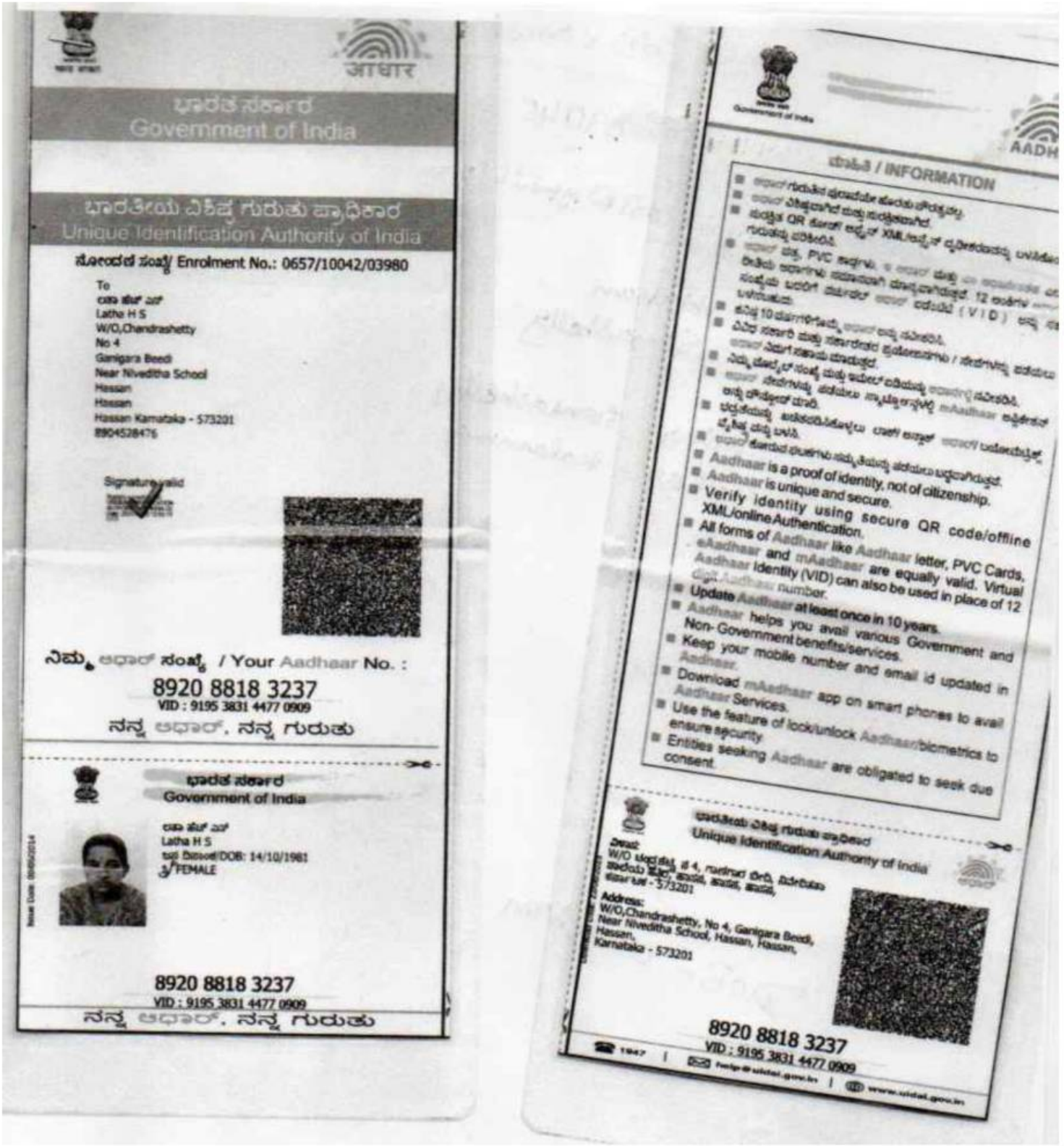
a. I , ...LATHA HASSAN SOMASHETTY....., in the capacity of .....SELF.....(Self/Representative Assessee) do hereby declare that what is stated above is true to the best of my knowledge and belief.

Place.....HASSAN

Date.....10/08/2026



(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.: 0657/10042/03980

To
ಲತಾ ಹೆಚ್ ಎಸ್
Latha H S
W/O,Chandrashetty
No 4
Ganigara Beedi
Near Niveditha School
Hassan
Hassan
Hassan Karnataka - 573201
8904528476

Signature valid

ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :
8920 8818 3237
VID : 9195 3831 4477 0909
ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

ಭಾರತ ಸರ್ಕಾರ
Government of India

ಲತಾ ಹೆಚ್ ಎಸ್
Latha H S
DOB: 14/10/1981
FEMALE

8920 8818 3237
VID : 9195 3831 4477 0909
ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

ಮಾಹಿತಿ / INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
- Aadhaar is unique and secure.
- Verify identity using secure QR code/offline XML/online Authentication.
- All forms of Aadhaar like Aadhaar letter, PVC Cards, eAadhaar and mAadhaar are equally valid. Virtual Aadhaar Identity (VID) can also be used in place of 12 digit Aadhaar number.
- Update Aadhaar at least once in 10 years.
- Aadhaar helps you avail various Government and Non- Government benefits/services.
- Keep your mobile number and email id updated in Aadhaar.
- Download mAadhaar app on smart phones to avail Aadhaar Services.
- Use the feature of lock/unlock Aadhaar/biometrics to ensure security.
- Entities seeking Aadhaar are obligated to seek due consent.

Unique Identification Authority of India

Address:
W/O,Chandrashetty, No 4, Ganigara Beedi, Near Niveditha School, Hassan, Hassan, Karnataka - 573201

8920 8818 3237
VID : 9195 3831 4477 0909

1947 | help@uidai.gov.in | www.uidai.gov.in

national health authority

Ayushman Bharat Health Account (ABHA)

आयुष्मान भारत स्वास्थ्य खाता (आभा)

Name/ ಹೆಸರು

Latha H S

ಲತಾ ಹೆಚ್ ಎಸ್

Abha Number/ ಅಭಾ ಸಂಖ್ಯೆ

91-7545-5708-2031

Abha Address/ ಅಭಾ ವಿಳಾಸ

latha.s9009@abdm

Gender/ ಲಿಂಗ

Female / ಹೆಣ್ಣು

Date Of Birth/ ಹುಟ್ಟಿದ ದಿನಾಂಕ

14-10-1981

Mobile/ ಮೊಬೈಲ್

8904528476

national health authority

Ayushman Bharat Health Account (ABHA)

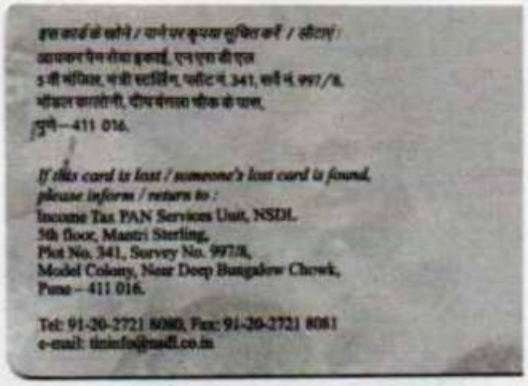
आयुष्मान भारत स्वास्थ्य खाता (आभा)

Toll-Free Number: 1800 114 477

Instructions

- 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 है।
- 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
भारत सरकार
GOVT. OF INDIA
LATHA H S
SWAMYSHETTY
14/10/1982
Permanent Account Number
AMWPL4606K
Signature
13012015


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