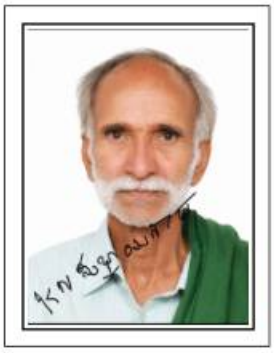
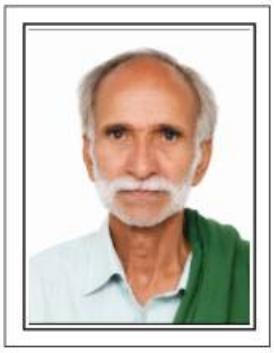


PAN CR-01

Request For Changes Or Correction in PAN Data

[For an Individual]



Permanent Account Number (PAN)
K Z P P S 6 5 1 6 H

Aadhaar Number
6 1 0 4 3 2 0 7 0 6 4 4

Sr. No.	Tick Box	PART A - Personal Information

1. A. Name (Tick)

First Name	K A L L U R U
Middle Name	N A N J E G O W D A S U B R A Y A
Last Name	G O W D A

B. Name *(as per Aadhaar)* (Tick)

K N S U B R A Y A G O W D A

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

3. Date of Birth (Tick) 0 1 / 0 1 / 1 9 4 7

4. Address (✓)

(Tick) ✓ Residence (Tick) Office *(select one)*

Flat/Door/Building	D A B B E G A D D E
Road/Street/Block/Sector	S A K A L E S H P U R T A L U K A
Post Office	D A B B E G A D D E
Area/Locality/Town/City	H A S A N
District	H A S S A N
State/Union Territory	KARNATAKA
Country/Region	INDIA
PIN / ZIP CODE	5 7 3 1 6 5

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 7 7 6 0 0 7 5 5 6 9
(ii) Email ID		kushalvc195@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. (Tick)	**Father's First Name**	
	Father's Middle Name	
	Father's Last Name	N A N J E G O W D A
9. (Tick)	**Mother's First Name**	
	Mother's Middle Name	
	Mother's Last Name	E R 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

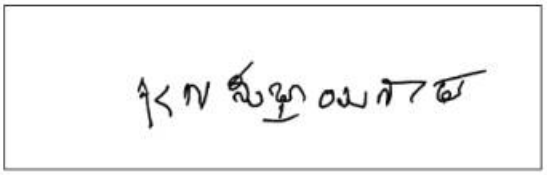
(✓) (iv) Documentay proof in support of other changes (✓) (v) Copy of PAN

Verification & Declaration

a. I , ...KALLURU NANJEGOWDA SUBRAYA GOWDA, 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.....13/08/2026



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

Unique Identification Authority of India

Government of India

Address:
S/O: Late Nanjegowda, dabbegadde
sakaleshpur taluku, Dabbegadde, Hasan,
Karnataka - 573165

ಕೆ ಎನ್ ಸುಬ್ರಾಯ ಗೌಡ
K N Subraya Gowda
ಜನ್ಮ ದಿನಾಂಕ/DOB: 01/01/1947
ಪುರುಷ/ MALE

6104 3207 0644
VID : 9138 2523 8405 6942

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

6104 3207 0644
VID : 9138 2523 8405 6942

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

national health authority

Ayushman Bharat Health Account (ABHA)
आयुष्मान भारत स्वास्थ्य खाता (आभा)

Name/ಹೆಸರು

K N Subraya Gowda

ಕೆ ಎನ್ ಸುಬ್ರಾಯ ಗೌಡ

ABHA number/ಅಭಾ ಸಂಖ್ಯೆ

91-3047-3385-0867

ABHA address/ಅಭಾ ವಿಳಾಸ

91304733850867@abdm

Gender/ಲಿಂಗ	Date of birth/ಹುಟ್ಟಿದ ದಿನಾಂಕ	Mobile/ಮೊಬೈಲ್
Male/ಗಂಡು	01-01-1947	7760075569

national health authority

Ayushman Bharat Health Account (ABHA)
आयुष्मान भारत स्वास्थ्य खाता (आभा)

Instructions

Toll- Free Number: 1800114477

- 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।

आयकर विभाग
INCOME TAX DEPARTMENT

भारत सरकार
GOVT. OF INDIA

स्थायी लेखा संख्या कार्ड
Permanent Account Number Card

KZPPS6516H

नाम / Name
K N SUBRAYA GOWDA

पिता का नाम / Father's Name
NANJEGOWDA

जन्म की तारीख / Date of Birth
01/01/1947

हस्ताक्षर / Signature

In case this card is lost / found, kindly inform / return to :

Income Tax PAN Services Unit, UTITSL
Plot No. 3, Sector 11, CBD Belapur,
Navi Mumbai - 400 614.

इस कार्ड के खोने/पाने पर कृपया सूचित करें/लौटाएं :
आयकर पैन सेवा यूनीट, यूटी आई आईटीएसएल
प्लाट नं: ३, सेक्टर ११, सी बी डी,बेलापूर,
नवी मुंबई-४०० ६१४.

Aaykar Sampark Kendras
For Income Tax Related Queries Call Toll Free Nos.
1961
or
18001801961