



FORM NO. 93

[See rule 158]

Application for Allotment of Permanent Account Number
[For an Individual being a Citizen of India]



Sr. No.

PART A - Personal Information

1. A. Name

First Name

T H U P P A

Middle Name

Last Name

S A R A S W A T H I

B. Name (as per Aadhaar)

T H U P P A S A R A S W A T H I

2. Gender (select one)

☐ Tick

Male

☒ Tick

Female

☐ Tick

Transgender

3. Date of Birth

0 1

0 1

1 9 9 4

4. Aadhaar Number

7 5 1 0 6 4 0 9 2 1 6 7

5. Residence Address

Flat/Door/Building

M A N E N A N 1 3 3 7

Road/Street/Block/Sector

A S H R Y A K A L O N I , W A R D N A N

Post Office

K . B E L A G A L

Area/Locality/Town/City

K E N C H A G A R A B E L A G A L

District

B E L L A R Y

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5 8 3 1 2 1

6. Office Address

Flat/Door/Building

Road/Street/Block/Sector

Post Office

Area/Locality/Town/City

District

State/Union Territory

Country/Region

PIN / ZIP CODE

7. Residential Status (select one as applicable)

☒ Tick

Resident

☐ Tick

Non Resident

☐ Tick

Resident but Not ordinarily Resident

8. Passport Number (mandatory for (i) Non Resident (ii) Resident but not ordinarily resident)

9. Taxpayer Identification Number (TIN) in the Country of Residence (if any)

10. Contact Details

(i) Mobile Number

Country Code

9 1

Mobile Number

8 3 1 2 1 1 3 3 7 0

(ii) Email ID

Shivararaj18@gmail.com

(iii) Landline No. with STD Code (if any) STD Code

Landline Number

PART B- Source of Income

11. Source of Income
(select one or more)

☐ Tick

Salary

☐ Tick

Income from Business/Profession

☐ Tick

Income from House Property

☐ Tick

Capital Gains

☒ Tick

Income from Other Sources

☐ Tick

No Income

PART C - Details of Parents

12. Whether mother/father is a single parent? (select one)

☐ Tick

Yes

☒ Tick

No

13. Father's First Name

Father's Middle Name

Father's Last Name

M A H A D E V A P P A

14. Mother's First Name	
Mother's Middle Name	
Mother's Last Name	N A R A S A M M A

15. Name of parent to be printed on Permanent Account Number card (select one) ☒ Father ☐ Mother

PART D - Assessing Officer (AO Code)

16. Assessing Officer (AO Code)	(i) Area Code	K A R	(ii) AO Type	W
	(iii) Range Code	4 2 1	(iv) AO No.	9 1

PART E- Representative Assessee, if applicable

17. RA's First Name	
RA's Middle Name	
RA's Last Name	

18. Permanent Account Number (if any)

19. Aadhaar Number (if Permanent Account Number is not available)

20. Representative Assessee Address		
Flat/Door/Building		
Road/Street/Block/Sector		
Post Office		
Area/Locality/Town/City		
District		
State/Union Territory	Country/Region	PIN / ZIP CODE

21. Contact Details		
(i) Mobile Number	Country Code	Mobile Number
(ii) Email ID		
(iii) Landline No. with STD Code (if any)	STD Code	Landline Number

Part F: Communication Address

22. Address for Communication (select one) ☒ Residence Address ☐ Representative Assessee Address ☐ Office Address

Part G: Declaration by Applicant or by Representative Assessee on behalf of the Applicant

23. Documents submitted as Proof of Identity, Proof of Address and Proof of Date of Birth of the Applicant

☒ (i) Proof of Identity ☒ (ii) Proof of Address ☒ (iii) Proof of Date of Birth

24. Documents submitted as Proof of Identity, Proof of Address of Representative Assessee

☐ (i) Proof of Identity ☐ (ii) Proof of Address

Verification & Declaration

THUPPA SARASWATHI
a. I, _____, in the capacity of _____ (Self/ Representative Assessee) do hereby declare that what is stated above is true to the best of my knowledge and belief.
b. I declare that the applicant does not possess Permanent Account Number and shall be liable for legal consequences under Income-Tax Act, 2025 if this declaration is found to be incorrect
Place. BELLARY
Date. 03/07/2026

ధరద్రా

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

Name: THUPPA SARASWATHI

Designation: AUTHORIZED PERSON



ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ / Enrolment No.: 0821/90939/00778

To

ತುಪ್ಪ ಸರಸ್ವತಿ

Thuppa Saraswathi

C/O Eramma,

mane nan # 1337,

ashrya kaloni,

ward nan 04,

k belagal,

VTC: Kenchagarabagal,

PO: K.belagal,

Sub District: Siruguppa,

District: Bellary,

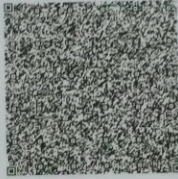
State: Karnataka,

PIN Code: 583121

Signature: 0821/90939/00778

Signature of Aadhaar Holder

Date: 2018-08-08 08:54:22



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :
7510 6409 2167
VID : 9141 7187 8310 9861



ಭಾರತ ಸರ್ಕಾರ
Government of India

ತುಪ್ಪ ಸರಸ್ವತಿ

Thuppa Saraswathi

ಜನ್ಮ ದಿನಾಂಕ (DOB): 01/01/1994

ಲಿಂಗ / GENDER

ಸ್ತ್ರೀ / FEMALE



Aadhaar no. Issued: 06/02/2014

ಆಧಾರ್ ಗುರುತಿನ ಪರಿಶೋಧನೆ: ಆಧಾರ್ ಕಾರ್ಡ್, ಆಧಾರ್ ಫೋಟೋ ಮತ್ತು ಆಧಾರ್ ಸಂಖ್ಯೆಯನ್ನು ಪರಿಶೀಲಿಸಿ. ಆಧಾರ್ ಸಂಖ್ಯೆಯು ನಿಮ್ಮ ಗುರುತಿನ ಸಾಕ್ಷಿಯಾಗಿದೆ. ಆಧಾರ್ ಸಂಖ್ಯೆಯನ್ನು ಸರಿಯಾಗಿ ಬಳಸಿ. ಆಧಾರ್ ಸಂಖ್ಯೆಯನ್ನು ಸರಿಯಾಗಿ ಬಳಸಿ. ಆಧಾರ್ ಸಂಖ್ಯೆಯನ್ನು ಸರಿಯಾಗಿ ಬಳಸಿ.

7510 6409 2167

ನನ್ನ ಆಧಾರ್. ನನ್ನ ಗುರುತು

ENDORSEMENT SLIP KGB B - 651062
Date : 20
Signature of A/c Holder(s)



ಭಾರತ ಚುನಾವಣಾ ಆಯೋಗ

ELECTION COMMISSION OF INDIA



UBB3676772



ಹೆಸರು: ತುಪ್ಪ ಸರಸ್ವತಿ

Name: Thuppa Saraswathi

ಗಂಡನ ಹೆಸರು: ಈರಣ್ಣ

Husband's Name: Eranna

ಲಿಂಗ / Gender: ಹೆಣ್ಣು / Female

ಜನ್ಮ ದಿನಾಂಕ / ವಯಸ್ಸು:

Date of Birth / Age: 01-01-1994



UBB3676772

e-Electors Photo Identity Card - ಇ-ಮತದಾರ ಭಾವಚಿತ್ರವಿರುವ ಗುರುತಿನ ಚೀಟಿ