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	DHANYA
Middle Name	NADLAKERI
Last Name	DINESH

B. Name *(as per Aadhaar)*

	DHANYA N D

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

3. Date of Birth — 14 05 2007

4. Aadhaar Number — 966922008687

5. Residence Address

Flat/Door/Building	C/O DINESH NADLAKERI PON
Road/Street/Block/Sector	KUMARALLI POST, SHANTHAL
Post Office	KUMARALLI
Area/Locality/Town/City	BEEDALLI, KUMARALLI VILL
District	KODAGU

State/Union Territory: KARNATAKA — Country/Region: INDIA — PIN / ZIP CODE: 571236

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)* — ✓ 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	91	Mobile Number	7899263146
(ii) Email ID	dhanyagowda920@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 | ✓ Income from Other Sources | Tick No Income

PART C - Details of Parents

12. Whether mother/father is a single parent? *(select one)* — Tick Yes | ✓ No

13. Father's First Name	DINESH
Father's Middle Name	NADLAKERI
Father's Last Name	PONAPPA

14.	**Mother's First Name**	
	Mother's Middle Name	
	Mother's Last Name	M O H I N I

15. **Name of parent to be printed on Permanent Account Number card** *(select one)* ☑ Father ☐ Tick 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: 3 2 1
(iv) AO No.: 9 2

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 ☐ Tick Representative Assessee Address ☐ Tick 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**

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

Verification & Declaration

a. I, DHANYA N D, 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.

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. KODAGU

Date. 09/07/2026

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

Name: DHANYA N D

Designation: AUTHORIZED PERSON

ಆಧಾರ

ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ/ Enrolment No.: 0821/91244/01703

To
ಧನ್ಯ ಎನ್ ಡಿ
Dhanya N D
C/O: Dinesh N P,
Beedalli,
VTC: Kumaralli,
PO: Kumarahalli,
Sub District: Somwarpet,
District: Kodagu,
State: Karnataka,
PIN Code: 571236,
Mobile: 9481602411

Signature valid

Digitally signed by Unique Identification Authority of India
05
Date: 2020/[illegible] 16:40:42
IST

ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :
9669 2200 8687
VID : 9113 2589 4445 5467

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

ಭಾರತ ಸರ್ಕಾರ
Government of India

Aadhaar no. issued: 13/02/2016

ಧನ್ಯ ಎನ್ ಡಿ
Dhanya N D
ಜನ್ಮದಿನಾಂಕ/DOB: 14/05/2007
ಸ್ತ್ರೀ/ FEMALE

ಆಧಾರ್ ಗುರುತಿನ ಪುರಾವೆಯಾಗಿದೆ, ಪೌರತ್ವ ಅಥವಾ ಜನ್ಮದಿನಾಂಕದ ಪುರಾವೆ ಅಲ್ಲ. ಇದನ್ನು ಆನ್‌ಲೈನ್ ದೃಢೀಕರಣ ಅಥವಾ QR ಕೋಡ್ / ಆಫ್‌ಲೈನ್ XML ಸ್ಕ್ಯಾನಿಂಗ್‌ನೊಂದಿಗೆ ಮಾತ್ರ ಬಳಸಬೇಕು.

Aadhaar is proof of identity, not of citizenship or date of birth. It should be used only with verification (online authentication or scanning of QR code / offline XML)

9669 2200 8687

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

ಭಾರತ ಚುನಾವಣಾ ಆಯೋಗ

ELECTION COMMISSION OF INDIA

ಮತದಾರರ ಫೋಟೊ ಗುರುತಿನ ಚೀಟಿ - Elector Photo Identity Card

UTZ5047071

ಹೆಸರು: ಧನ್ಯ ಎನ್ ಡಿ

Name: Dhanya N D

ತಂದೆಯ ಹೆಸರು: ದಿನೇಶ್ ಎನ್ ಪಿ

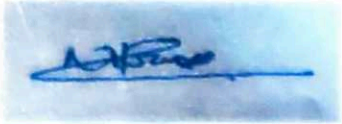
Father's Name: Dinesh N P

ಲಿಂಗ / Gender: ಹೆಣ್ಣು / Female

ಜನ್ಮ ದಿನಾಂಕ / ವಯಸ್ಸು:

Date of Birth / Age: 14-05-2007

UTZ5047071



ವಿಳಾಸ: ಬೀದಳ್ಳಿ, ಕುಮಾರಳ್ಳಿ ವಿಲೇಜ್, ಕುಮಾರಳ್ಳಿ ಪೋಸ್ಟ್, ಶಾಂತಳ್ಳಿ ಹೋಬಳಿ, ಸೋಮವಾರಪೇಟೆ ತಾಲೂಕು, ಕೊಡಗು, ಕರ್ನಾಟಕ- 571236

Address: BEEDALLI, KUMARALLI VILLAGE, KUMARALLI POST, SHANTHALLI HOBALI, SOMWARPET TALUK, KODAGU, KARNATAKA- 571236

ಮತದಾರರ ನೋಂದಣಾಧಿಕಾರಿ, 208 - ಮಡಿಕೇರಿ

Electoral Registration Officer, 208 - Madikeri

Issue Date: 02-02-2026

ಸೂಚನೆ / Note:

1) ಪ್ರತಿ ಚುನಾವಣೆಯ ಮೊದಲು ಪ್ರಸ್ತುತ ಮತದಾರರ ಪಟ್ಟಿಯಲ್ಲಿ ನಿಮ್ಮ ಹೆಸರು ಇದೆಯೇ ಎಂದು ಪರಿಶೀಲಿಸಿಕೊಳ್ಳಿ

Before every Election, please check that your name exists in current electoral roll.

2) ಈ ಮತದಾರರ ಗುರುತಿನ ಚೀಟಿಯು ಚುನಾವಣೆ ಉದ್ದೇಶಕ್ಕೆ ಹೊರತು ವಯಸ್ಸಿನ ಪುರಾವೆಗೆ ಅಲ್ಲ

This card is not a proof of age except for purpose of Election.

Scan By VHA/BLO App

UTZ5047071