



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 A N M A I

Middle Name

Last Name

H E G D E

## B. Name (as per Aadhaar)

T H A N M A I H E G D E

## 2. Gender (select one)



Male



Female



Transgender

## 3. Date of Birth

3 1 0 5 2 0 0 8

## 4. Aadhaar Number

6 9 1 7 5 3 7 3 0 2 3 9

## 5. Residence Address

Flat/Door/Building

1 - 2 3 0 , H A K L U M A N E

Road/Street/Block/Sector

A G L I B A I L U

Post Office

S H E D I M A N E

Area/Locality/Town/City

S H E D I M A N E

District

U D U P I

State/Union Territory

KARNATAKA

Country/Region

I N D I A

PIN / ZIP CODE

5 7 6 2 1 2

## 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



Non Resident



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

7 6 7 6 2 9 0 1 6 6

(ii) Email ID

lathahegde106@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)

Salary



Income from Business/Profession



Income from House Property



Capital Gains



Income from Other Sources



No Income

## PART C - Details of Parents

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



Yes



No

## 13. Father's First Name

S A T H I S H

Father's Middle Name

Father's Last Name

H E G D E

|                         |               |
|-------------------------|---------------|
| 14. Mother's First Name |               |
| Mother's Middle Name    |               |
| Mother's Last Name      | S U R E K H 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 | 5 3 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 ☐ 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

THANMAI HEGDE

a. I, ..... 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. UDUPI

Date. 19/07/2026



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

Name: THANMAI HEGDE

Designation: AUTHORIZED PERSON



सत्यमेव जयते  
भारत सरकार



ಭಾರತ ಸರ್ಕಾರ  
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ  
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ/ Enrolment No.: 0804/57611/01039

To  
ತನ್ಮಯ್ ಹೆಗ್ಡೆ  
Thanmai Hegde  
S/O: Sathish Hegde,  
1-230,  
Haklu mane,  
Aglibailu,  
VTC: Shedimane,  
PO: Shedimane,  
Sub District: Kundapura,  
District: Udupi,  
State: Karnataka,  
PIN Code: 576212  
Mobile: 7676290166

Signature valid  
Digitally signed by S Unique  
Identification Authority of India  
06  
Date: 2020.05.19 13:14:57  
IST



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :  
6917 5373 0239

VID : 9124 4317 4621 5872

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ  
Government of India

Aadhaar no. Issued: 15/01/2016



ತನ್ಮಯ್ ಹೆಗ್ಡೆ  
Thanmai Hegde  
ಜನ್ಮ ದಿನಾಂಕ/DOB: 31/05/2008  
ಪುರುಷ/ MALE

ಆಧಾರ್ ಗುರುತಿನ ಪುರಾವೆಯಾಗಿದೆ, ಪೌರತ್ವ ಅಥವಾ ಜನ್ಮ ದಿನಾಂಕದ 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)

6917 5373 0239

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

ನಂ :  
NO:

ನಮೂನೆ - 5  
Form - 5



ಕರ್ನಾಟಕ ಸರ್ಕಾರ  
GOVERNMENT OF KARNATAKA  
ಜನನ ಮತ್ತು ಮರಣಗಳ ಮುಖ್ಯ ರಿಜಿಸ್ಟ್ರಾರರು  
Chief Registrar of Births and Deaths



**ಜನನ ಪ್ರಮಾಣ ಪತ್ರ**

(ಜ. ಮ. ನೋ ಅಧಿನಿಯಮ, 1969ರ 12/17 ನೆಯ ಪ್ರಕರಣ ಹಾಗೂ ಕ.ಜ.ಮ.ನೋ.ನಿಯಮಗಳು, 1999ರ ನಿಯಮ 8/13 ರ ಮೇರೆಗೆ ಕೊಡಲಾದ)

**BIRTH CERTIFICATE**

(Issued Under Section 12/17 of the RBD Act, 1969 and Rule 8/13 of the KRBD Rules, 1999)

ಈ ಕೆಳಕಂಡ ವಿವರಣೆಯನ್ನು ಕರ್ನಾಟಕ ರಾಜ್ಯದ ಉಡುಪಿ ಜಿಲ್ಲೆಯ ಕುಂದಾಪುರ ತಾಲ್ಲೂಕಿನ ಕುಂದಾಪುರ (ಗ್ರಾಮ/ಪಟ್ಟಣ) ದ ರಿಜಿಸ್ಟ್ರಾರನಲ್ಲಿರುವ ಜನನ ಸಂಬಂಧವಾದ ಮೂಲ ದಾಖಲೆಯಿಂದ ತೆಗೆದುಕೊಳ್ಳಲಾಗಿದೆಯೆಂದು ಪ್ರಮಾಣೀಕರಿಸಲಾಗಿದೆ.

This is to certify that the following information has been taken from the original record of birth which is the register for KUNDAPUR (village / town) of KUNDAPUR taluk of Udupi district of Karnataka state.

1) ಹೆಸರು :

Name ತನ್ಮಯಿ ಹೆಗ್ಡೆ

2) ಲಿಂಗ :

Sex Male

3) ಜನನವಾದ ತಾರೀಖು:

Date of Birth 31/05/2008

4) ಜನಿಸಿದ ಸ್ಥಳ:

Place of Birth Hospital - VINAYA NURSING HCME, YODERHOBILI, KUNDAPUR, KUNDAPURA, KUNDAPUR(T), Udupi(D), KARNATAKA(S)

5) ತಾಯಿಯ ಹೆಸರು:

Name of Mother ಸುರೇಖಾ

6) ತಂದೆಯ ಹೆಸರು:

Name of Father ಸತೀಶ ಹೆಗ್ಡೆ

7) ಮಗುವಿನ ಜನನದ ಸಮಯದಲ್ಲಿ ತಂದೆತಾಯಿಯರ ವಿಳಾಸ:

Address of parents at the time of birth of the child  
ಶೇಡಿಮನೆ ಕುಂದಾಪುರ, ಕುಂದಾಪುರ (T), ಉಡುಪಿ (D), KARNATAKA

8) ತಂದೆ ತಾಯಿಯರ ಖಾಯಂ ವಿಳಾಸ:

Permanent address of parents  
ಶೇಡಿಮನೆ ಕುಂದಾಪುರ, ಕುಂದಾಪುರ (T), ಉಡುಪಿ (D), KARNATAKA

9) ನೋಂದಣಿ ಸಂಖ್ಯೆ:

Registration Number 2008-B-2738

10) ನೋಂದಣಿಯಾದ ದಿನಾಂಕ

Date of Registration 04/06/2008

11) ಪರಾ: (ಯಾವುದಾದರೂ ಇದ್ದಲ್ಲಿ):

Remarks (if any) \*\*\*\*\*

12) ಪ್ರಮಾಣ ಪತ್ರ ನೀಡಿದ ದಿನಾಂಕ:

Date of Issue 12/06/2012

13) ಪ್ರಮಾಣ ಪತ್ರ ಕೊಡುವ ಪ್ರಾಧಿಕಾರಿಯ ಸಹಿ:

Signature of issuing Authority

14) ಪ್ರಮಾಣ ಪತ್ರ ಕೊಡುವ ಪ್ರಾಧಿಕಾರಿಯ ವಿಳಾಸ:

Address of issuing Authority

REGISTRAR OF BIRTH & DEATH  
TOWN MUNICIPAL OFFICE  
KUNDAPURA

ಮೊಹರು / Seal

"ಪ್ರತಿಯೊಂದು ಜನನ ಮತ್ತು ಮರಣದ ನೋಂದಣಿಯನ್ನು ಖಚಿತಪಡಿಸಿಕೊಳ್ಳಿ"

"Ensure registration of every Birth and Death"