



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

D E V A R A J

Middle Name

A S H O K

Last Name

A N N I G E R I

B. Name (as per Aadhaar)

D E V A R A J A S H O K A N N I G E R I

2. Gender (select one)



Male



Female



Transgender

3. Date of Birth

1 0

1 0

2 0 0 4

4. Aadhaar Number

6 6 4 8 3 6 9 3 8 2 7 1

5. Residence Address

Flat/Door/Building

C / O A S H O K

Road/Street/Block/Sector

A D V I S O M A P U R

Post Office

A D V I S O M A P U R

Area/Locality/Town/City

A D A V I S O M A P U R

District

G A D A G

State/Union Territory

KARNATAKA

Country/Region

I N D I A

PIN / ZIP CODE

5 8 2 1 0 3

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 3 5 3 5 0 3 8 0 7

(ii) Email ID

muttuadavisomapur@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

Father's Middle Name

Father's Last Name

A S H O K

14. Mother's First Name	
Mother's Middle Name	
Mother's Last Name	B 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 1 1	(iv) AO No.	1 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

DEVARAJ ASHOK ANNIGERI

SELF

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. GADAG

Date. 24/07/2026

देवराज

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

Name: DEVARAJ ASHOK ANNIGERI

Designation: AUTHORIZED PERSON



ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

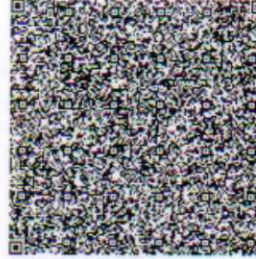
ನೋಂದಣಿ ಸಂಖ್ಯೆ / Enrollment No.: 0656/10621/05940

To
ದೇವರಾಜ ಅಶೋಕ ಅಣ್ಣಿಗೇರಿ
Devaraj Ashok Annigeri
C/O Ashok,
advisomapur, advisomapur,
VTC: Advisomapur,
PO: Advisomapur,
Sub District: Gadag, District: Gadag,
State: Karnataka,
PIN Code: 582103,
Mobile: 7353503807

305128609



MJ051286090FL



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

6648 3693 8271

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India



Aadhaar no. issued: 08/07/2013



ದೇವರಾಜ ಅಶೋಕ ಅಣ್ಣಿಗೇರಿ
Devaraj Ashok Annigeri
ಜನ್ಮ ದಿನಾಂಕ / DOB : 10/10/2004
ಪುರುಷ / Male

ಆಧಾರ್ ಗುರುತಿನ ಪ್ರಮಾಣವಾಗಿದೆ, ಪೌರತ್ವ ಅಥವಾ ಜನ್ಮ ದಿನಾಂಕದ
ಪ್ರಮಾಣವಲ್ಲ. ಇದನ್ನು ಆನ್‌ಲೈನ್ ದೃಢೀಕರಣ ಅಥವಾ QR ಕೋಡ್ /
ಆಫ್‌ಲೈನ್ XML ಸ್ಕ್ಯಾನ್‌ಗೊಂದಿಗೆ 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)**

6648 3693 8271

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



21914364

ಕರ್ನಾಟಕ



ಸರ್ಕಾರ

GOVERNMENT OF KARNATAKA

YMB11171



ಕರ್ನಾಟಕ ಪ್ರೌಢ ಶಿಕ್ಷಣ ಪರೀಕ್ಷಾ ಮಂಡಳಿ
Karnataka Secondary Education Examination Board

ಅಂಕ ಪಟ್ಟಿ ಹಾಗೂ ಪ್ರಮಾಣ ಪತ್ರ / Marks Statement cum Certificate



ಈ ಕೆಳಗೆ ನಮೂದಿತ ಅಭ್ಯರ್ಥಿಯು ಎಸ್.ಎಸ್.ಎಲ್.ಸಿ. ಪರೀಕ್ಷೆಯಲ್ಲಿ ತೇರ್ಗಡೆಯಾಗಿರುವುದನ್ನು ಪ್ರಮಾಣೀಕರಿಸಿದೆ.

MB0204211006

This is to certify that the below mentioned candidate has passed S.S.L.C. Examination.

ನೋಂದಣಿ ಸಂಖ್ಯೆ / Register No. : 20210869936

ತಿಂಗಳು - ವರ್ಷ / Month - Year : JULY-2021

ಶಿಕ್ಷಣ ಮಾಧ್ಯಮ / Medium of Instruction : KANNADA

ಅಭ್ಯರ್ಥಿ ಬಗೆ / Candidate Type : CCE PRIVATE FRESH

ಹೆಸರು / Name : DEVARAJ ASHOK ANNIGERI

ತಂದೆಯ ಹೆಸರು / Father's Name : ASHOK

ತಾಯಿಯ ಹೆಸರು / Mother's Name : BASAMMA

ಜನ್ಮ ದಿನಾಂಕ /
Date of Birth : 10-10-2004 TENTH - OCTOBER - TWO THOUSAND FOURಲಿಂಗ /
Gender : BOY

ಶೈಕ್ಷಣಿಕ ವಿಷಯಗಳು SCHOLASTIC SUBJECTS	ಅಂಕಗಳು / MARKS		ಗಳಿಸಿದ ಅಂಕಗಳು MARKS OBTAINED	ಶ್ರೇಣಿ GRADE
	ಗರಿಷ್ಠ ಅಂಕಗಳು MAX. MARKS	ಕನಿಷ್ಠ ಅಂಕಗಳು MIN. MARKS		
ಪ್ರಥಮ ಭಾಷೆ / FIRST LANGUAGE : KANNADA	125	44	79	B
ದ್ವಿತೀಯ ಭಾಷೆ / SECOND LANGUAGE : ENGLISH	100	35	78	B
ತೃತೀಯ ಭಾಷೆ / THIRD LANGUAGE : HINDI	100	35	60	B
ಗಣಿತ / MATHEMATICS	100	35	68	B
ವಿಜ್ಞಾನ / SCIENCE	100	35	35	C
ಸಮಾಜ ವಿಜ್ಞಾನ / SOCIAL SCIENCE	100	35	35	C
ಒಟ್ಟು ಅಂಕಗಳು / TOTAL MARKS :	625	219	355	ಸರಾಸರಿ / CGA : C
ಗಳಿಸಿದ ಒಟ್ಟು ಅಂಕಗಳು (ಅಕ್ಷರಗಳಲ್ಲಿ) / TOTAL MARKS OBTAINED (IN WORDS) : THREE HUNDRED FIFTY FIVE				(56.8%)

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ಶಾಲಾ ಸಂಕೇತ, ಹೆಸರು ಮತ್ತು ವಿಳಾಸ /
SCHOOL CODE, NAME AND ADDRESS :

MB0204

GOVT HIGH SCHOOL

ADAVI SOMAPURA, GADAG TQ, GADAG DIST

ಕಾರ್ಯದರ್ಶಿ

ಕರ್ನಾಟಕ ಪ್ರೌಢ ಶಿಕ್ಷಣ ಪರೀಕ್ಷಾ ಮಂಡಳಿ, ಬೆಂಗಳೂರು

SECRETARY

KARNATAKA SECONDARY EDUCATION EXAMINATION BOARD,
BENGALURU

ದಿನಾಂಕ / DATE : 09.08.2021

21914364