

**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

Middle Name

Last Name

H U S E N A M M A

B. Name (as per Aadhaar)

H U S E N A M M A

2. Gender (select one)☐ Tick

Male

☒ Tick

Female

☐ Tick

Transgender

3. Date of Birth

2 0 0 7 1 9 9 8

4. Aadhaar Number

9 3 8 7 2 4 6 6 0 9 2 9

5. Residence Address

Flat/Door/Building

C / O M A T T A Y Y A

Road/Street/Block/Sector

N E A R A N G A N A V A D I S C H O O L

Post Office

B O M M A L A P U R A

Area/Locality/Town/City

K O T T A L A C H I N T A

District

B A L L A R I

State/Union Territory

KARNATAKA

Country/Region

I N D I A

PIN / ZIP CODE

5 8 3 1 1 4

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

9 0 0 8 5 7 7 6 7 1

(ii) Email ID

manforever.honey143@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

H A N U M A N T H A P P A

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

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

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

[illegible]

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

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

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

HUSENAMMA **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: BALLARI

Date..27/07/2026

దానిని నువ్వు

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

Name: HUSENAMMA

Designation: **AUTHORIZED PERSON**



ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ

ಭಾರತ ಸರ್ಕಾರ

Unique Identification Authority of India
Government of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ/ Enrolment No.: 2189/42225/09233

To

ಹುಸನಮ್ಮ

Husenamma

W/O Mattayya

Near Anganavadi School

Bommalapura

Kottalachinta

Ballari Karnataka - 583114

9008577671

Download Date: 03/02/2018

Generation Date: 24/01/2018

Signature valid

Digitally signed
UNIQUE IDENTIFICATION
AUTHORITY OF INDIA 03
Date: 2018.02.03 10:06:14
IST



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

9387 2466 0929

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ

Government of India



ಹುಸನಮ್ಮ

Husenamma

ಜನ್ಮ ದಿನಾಂಕ/DOB: 20/07/1998

ಸ್ತ್ರೀ/ FEMALE



9387 2466 0929

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ಭಾರತ ಚುನಾವಣಾ ಆಯೋಗ

ನವೆಂಬರ್ ೧೯೬೩

**ELECTION COMMISSION OF INDIA
IDENTITY CARD**

UBB2938363



ಚುನಾವಣಾಕಾರ್ತಕ : ಹುಸೇನಮ್ಮ

Elector's Name : Husenamma

ಹೆಸರಿನ ಪತನ : ಮತ್ತಾಯ

Husband's Name: Matlayya

ಲಿಂಗ / Sex : ಮಹಿಳೆ / Female

ಜನ್ಮ ದಿನಾಂಕ / Date of Birth : 20/07/1963