



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

N A Y A N A

Middle Name

Last Name

D E V A L I N G A

B. Name (as per Aadhaar)

N A Y A N A D

2. Gender (select one)

Tick

Male

Tick

Female

Tick

Transgender

3. Date of Birth

0

1

0

8

2

0

0

0

4. Aadhaar Number

9

3

1

0

8

1

7

4

4

9

0

6

5. Residence Address

Flat/Door/Building

C / O

R

E

N

U

K

U

M

A

R

A

,

#

0

0

Road/Street/Block/Sector

K

A

S

A

B

A

H

O

B

A

L

L

I

Post Office

A

D

A

G

U

R

Area/Locality/Town/City

C

H

O

L

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N

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H

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L

L

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C

H

A

N

N

A

R

A

Y

District

H

A

S

S

A

N

State/Union Territory

KARNATAKA

Country/Region

I N D I A

PIN / ZIP CODE

5

7

3

1

1

6

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

7

4

1

5

7

6

9

8

2

(ii) Email ID

colorsnetwork@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

D

E

V

A

L

I

N

G

A

Father's Middle Name

M

A

T

H

I

G

A

T

T

A

Father's Last Name

S

H

I

V

A

L

I

N

G

A

I

A

H

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	W	
	(iii) Range Code	3	2	1	(iv) AO No.	9	2

[illegible]

18. Permanent Account Number (*if any*)

[illegible]

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				

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

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

a. I, NAYANA 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. HASSAN

Date. 07/08/2026

Nayana.D

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

Name: NAYANA D

Designation: **AUTHORIZED PERSON**



सत्यमेव जयते
भारत सरकार



ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಾವಣೆ ಕ್ರಮ ಸಂಖ್ಯೆ / Enrollment No. : 2825/11185/64832

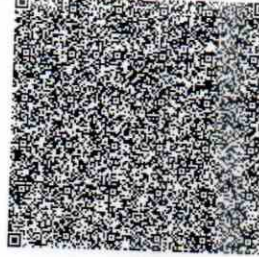
To
Nayana D
ನಯನ ಡಿ
C/O Renukumara,
00,
Kasaba hoballi,
Channarayapatana thaluk,
A cholenahalli,
VTC: Adagur, PO: Adagur,
Sub District: Channarayapatna, District: Hassan,
State: Karnataka, PIN Code: 573116,
Mobile: 8861269831

08/07/2012

12191981



KF121919817FI



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

9310 8174 4906

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India



ನಯನ ಡಿ
Nayana D
ಜನ್ಮ ದಿನಾಂಕ / DOB: 01/08/2000
ಸ್ತ್ರೀ / Female

9310 8174 4906

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

08/07/2012



सत्यमेव जयते

ಭಾರತ ಚುನಾವಣಾ ಆಯೋಗ

ELECTION COMMISSION OF INDIA

ಮತದಾರರ ಭಾವಚಿತ್ರವಿರುವ ಗುರುತಿನ ಚೀಟಿ

Electors Photo Identity Card



UFJ5767991



ಹೆಸರು : ನಯನಾ ಡಿ

Name : NAYANA D

ಗಂಡನ ಹೆಸರು : ಕೆ.ಎನ್.ಕುಮಾರ್

Husband's Name : K.N.KUMAR

ಭಾರತ ಚುನಾವಣಾ ಆಯೋಗ

EPIC No. : UFJ5767991

ಲಿಂಗ/Gender : ಮಹಿಳೆ / Female

ಜನ್ಮ ದಿನಾಂಕ/ವಯಸ್ಸು : 01-08-2000

Date of Birth/ Age :

ವಿಳಾಸ : 212, ಚೋಲನಹಳ್ಳಿ, ಚೋಲನಹಳ್ಳಿ, ಅಡಗೂರು,
ಹಾಸನ, ಕರ್ನಾಟಕ-573116

Address : 212, CHOLENAHALLI, CHOLENAHALLI, ADAGURU,
HASSAN, KARNATAKA-573116

ದಿನಾಂಕ/ Date : 18-06-2022 ಮತದಾರರ ನೋಂದಣಾಧಿಕಾರಿ
Electoral Registration Officer

ವಿಧಾನ ಸಭಾ ಕ್ಷೇತ್ರದ ಸಂಖ್ಯೆ ಮತ್ತು ಹೆಸರು :

193-ಶ್ರವಣಬೆಳಗೊಳ

Assembly Constituency No. and Name : 193-
Shravanabelagola

Note / ಸೂಚನೆ

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

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

2) ಈ ಮತದಾರರ ಗುರುತಿನ ಚೀಟಿಯು ಚುನಾವಣೆಯ ಉದ್ದೇಶಕ್ಕೆ ಹೊರತು ವೇಯಸ್ಸಿನ ಪುರಾವೆಗೆಲ್ಲ.

2) This card is not a proof of age except for the purpose of election.