



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

C H I N N A

Middle Name

Last Name

M A R E P P A

B. Name (as per Aadhaar)

C H I N N A M A R E P P A

2. Gender (select one)



Male



Female



Transgender

3. Date of Birth

0

6

1

0

2

0

0

6

4. Aadhaar Number

6

8

2

0

6

3

0

4

8

7

3

3

5. Residence Address

Flat/Door/Building

5

W

A

R

D

Road/Street/Block/Sector

S

I

D

D

A

P

P

A

N

A

G

A

R

Post Office

H

A

L

E

K

O

T

A

Area/Locality/Town/City

H

A

L

E

K

O

T

A

District

B

A

L

L

A

R

I

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5

8

3

1

2

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

3

4

9

4

8

4

5

8

4

(ii) Email ID

manuforever.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)



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

R

A

Y

I

Father's Middle Name

Father's Last Name

J

A

M

B

A

N

N

A

14. Mother's First Name	
Mother's Middle Name	
Mother's Last Name	A N J I N 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	C
(iii) Range Code	4 2 1	(iv) AO No.	9 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

CHINNA MAREPPA

a. I, CHINNA MAREPPA, 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. BALLARI

Date. 20/08/2026

ಚಿನ್ನ ಮಾರೆಪ್ಪ

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

Name: CHINNA MAREPPA

Designation: AUTHORIZED PERSON



ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ/ Enrolment No.: S133/18781/29740

To

ಚಿನ್ನ ಮಾರೆಪ್ಪ

Chinna Mareppa

S/O: Sarayi Jambanna,

5 ward,

siddappa nagar,

halekote,

VTC: Halekote,

PO: Halekote,

Sub District: Siruguppa,

District: Ballari,

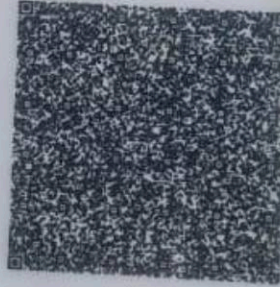
State: Karnataka,

PIN Code: 583122,

Mobile: 7349484584

Signature valid

Digitally signed by Unique
Identification Authority of India
on
Date: 2023.11.15 11:49:47
IST



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

6820 6304 8733

VID : 9148 0498 7072 3520

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India



ಚಿನ್ನ ಮಾರೆಪ್ಪ

Chinna Mareppa

ಜನ್ಮ ದಿನಾಂಕ/DOB: 06/10/2006

ಪುರುಷ/ MALE

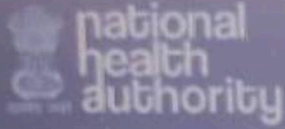
ಆಧಾರ್ ಗುರುತಿನ ಪುರಾವೆಯಾಗಿದೆ, ಪೌರತ್ವ ಅಥವಾ ಜನ್ಮ ದಿನಾಂಕದ ಪುರಾವೆ
ಅಲ್ಲ. ಇದನ್ನು ಐನ್‌ಫೋಕ್ ದೃಢೀಕರಣ ಅಥವಾ QR ಕೋಡ್ / ಐಫೋಕ್ XML
ಅಥವಾ ನಿರ್ಗಮನದ ಮೂಲಕ ಬಳಸಬೇಕು.

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.)

6820 6304 8733

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

Aadhaar no. issued: 23/11/2015



Ayushman Bharat Health Account (ABHA)
आयुष्मान भारत स्वास्थ्य खाता (आभा)



Name/ ಹೆಸರು

Chinna Mareppa

ಚಿನ್ನ ಮಾರೇಪ್ಪ

Abha Number/ ಅಭಾ ಸಂಖ್ಯೆ

91-4438-7310-6068

Abha Address/ ಅಭಾ ವಿಳಾಸ

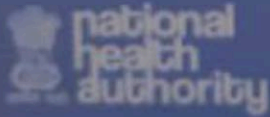
chinna734948454@abdm



Gender/ ಲಿಂಗ
Male / ಗಂಡು

Date Of Birth/ ಹುಟ್ಟಿದ ದಿನಾಂಕ
06-10-2006

Mobile/ ಮೊಬೈಲ್
7349484584



Ayushman Bharat Health Account (ABHA)
आयुष्मान भारत स्वास्थ्य खाता (आभा)

