

**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

S H E K A N N A

B. Name (as per Aadhaar)

S H E K A N N A

2. Gender (select one)

Male



Female



Transgender

3. Date of Birth

0

1

0

1

2

0

0

1

4. Aadhaar Number

3

3

0

3

6

5

8

0

7

7

2

1

5. Residence Address

Flat/Door/Building

C

/

O

M

U

K

A

P

P

A

Road/Street/Block/Sector

N

E

A

R

G

R

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1

4

T

Post Office

T

E

K

K

A

L

A

K

O

T

E

Area/Locality/Town/City

H

A

L

E

K

O

T

E

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

8

0

8

8

2

1

5

7

6

5

(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)**

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

M

U

K

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

a. I, SHEKANNA, 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 24/08/2026

എറുപ്തം

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

Name: SHEKANNA

Designation: AUTHORIZED PERSON



ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ/ Enrolment No.: S132/94000/98540

To

ಶೇಖರ್

Shekanna

C/O: Mukappa,

near gyanappa temple,

14th ward,

Tekkalkote,

VTC: Halekote,

PO: Tekkalakota,

Sub District: Singappa,

District: Bellary,

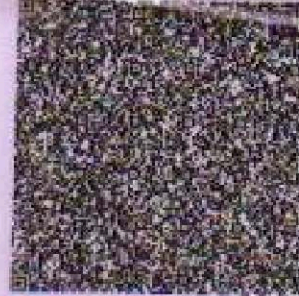
State: Karnataka,

PIN Code: 583122,

Mobile: 8088215745

Signature valid

Digitally signed by Shekanna
DN: cn=Shekanna, o=Unique Identification Authority of India
c=IN, email=shekanna@uniqueid.gov.in, serial=14, c=IN



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

3303 6580 7721

VID : 9134 8973 2059 6534

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India

Aadhaar no. issued: 21/11/2019



ಶೇಖರ್

Shekanna

ಜನ್ಮ ದಿನಾಂಕ/DOB: 01/01/2001

ಪುರುಷ/ MALE

ಆಧಾರ್ ಗುರುತಿನ ಪ್ರಮಾಣವಾಗಿದೆ, ಪೌರತ್ವ ಅಥವಾ ಜನ್ಮ ದಿನಾಂಕದ ಪ್ರಮಾಣ
ಇಲ್ಲ. ಇದನ್ನು ಲೈವ್/ಆಫ್ ಲೈನ್ ದೃಢೀಕರಣ ಅಥವಾ ಡಿ.ಆರ್.ಕೋಡ್ / ಆಫ್ ಲೈನ್ XSL
ಸಹಿ ಮೂಲಕವೇ 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 XSL.)

3303 6580 7721

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಚುನಾವಣಾ ಆಯೋಗ
ELECTION COMMISSION OF INDIA

ಮತದಾರರ ಪ್ರಾಥಮಿಕ ಗುರುತಿನ ಚೀಟಿ - Elector Photo Identity Card



UBB3398716



ಹೆಸರು : ಶೇಕಣ್ಣ

Name : Shekanna

ತಂದೆಯ ಹೆಸರು : ಮುಕಪ್ಪ

Father's Name : Mukappa

ಲಿಂಗ / ಲಿಂಗ : ಪುರುಷ / Male

ಜನ್ಮ ದಿನಾಂಕ/ವಯಸ್ಸು :

Date of Birth / Age : 01-01-2001

