



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

H A R M A I N

Middle Name

Last Name

F A T H I M A

B. Name (as per Aadhaar)

H A R M A I N F A T H I M A

2. Gender (select one)

☐

Male

☒

Female

☐

Transgender

3. Date of Birth

0

7

0

5

2

0

0

8

4. Aadhaar Number

9

2

0

6

9

1

3

2

6

1

4

6

5. Residence Address

Flat/Door/Building

#

9

5

Road/Street/Block/Sector

S

L

U

M

B

O

A

R

D

V

I

S

H

W

A

N

A

T

H

A

N

Post Office

H

A

S

S

A

N

Area/Locality/Town/City

H

A

S

S

A

N

District

H

A

S

S

A

N

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5

7

3

2

0

1

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

6

3

6

6

5

7

2

5

0

9

(ii) Email ID

colorsnetzone@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

N

A

S

E

E

R

Father's Middle Name

Father's Last Name

P

A

S

H

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

[illegible][illegible]

19. Aadhaar Number (if Permanent Account Number is not available)

20. Representative Assessee Address

[illegible]

21. Contact Details

[illegible]

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

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

HARMAIN FATHIMA

HARMAIN FATHIMA

a. I,, 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.. **28/08/2026**

Harmin Jathima

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

Name: **HARMAIN FATHIMA**

Designation: **AUTHORIZED PERSON**



ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ

ಭಾರತ ಸರ್ಕಾರ

Unique Identification Authority of India
Government of India

ನೋಂದಾವಣಿ ಕ್ರಮ ಸಂಖ್ಯೆ / Enrollment No.: 2086/15109/02966

To
ಹರ್ಮೈನ್ ಫಾತಿಮಾ
Harmain Fathima
D/O Naseer Pasha
#95
slum board vishwanatha nagara
Hassan
Hassan
Hassan
Karnataka 573201
9480249637

15/12/2011

176094986



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ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

9206 9132 6146

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ಭಾರತ ಸರ್ಕಾರ

Government of India



ಹರ್ಮೈನ್ ಫಾತಿಮಾ
Harmain Fathima
ಜನ್ಮ ದಿನಾಂಕ / DOB : 07/05/2008
ಸ್ತ್ರೀ / Female



9206 9132 6146

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