



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

D H A N U S H R E E

Middle Name

B E T T A D A L L I

Last Name

D I N E S H A

B. Name (as per Aadhaar)

D H A N U S H R E E B D

2. Gender (select one)

☐ Male ☒ Female ☐ Transgender

3. Date of Birth

1 7 0 7 2 0 0 8

4. Aadhaar Number

8 9 9 5 0 4 9 7 7 0 9 2

5. Residence Address

Flat/Door/Building

3

Road/Street/Block/Sector

S O M W A R P E T

Post Office

B E T T A D A L L I

Area/Locality/Town/City

S O M W A R P E T

District

K O D A G U

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5 7 1 2 3 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)

☒ 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

9 4 4 8 7 9 6 2 7 3

(ii) Email ID

ashwinganapathy00@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

B E T T A D A L L I

Father's Middle Name

M A L L A I A H

Father's Last Name

D I N E 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][illegible]

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

DHANUSHREE B D

a. I, DHANUSHREE B 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. KODAGU

Date..31/08/2026

Parasitism

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

Name: DHANUSHREE B D

Designation: **AUTHORIZED PERSON**

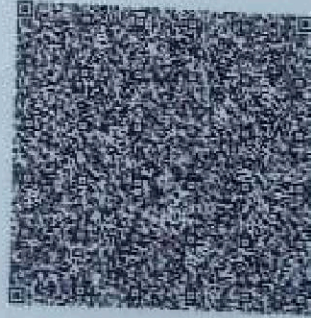


ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ / Enrolment No.: 2825/07526/01367

To
ಧನುಷ್ ಶ್ರೀ ಬಿ ಡಿ
Dhanushree B D
D/O: B.M.Dinesha,
3,
somwarpet,
VTC: Bettadahalli,
PO: Bettadahalli,
Sub District: Somwarpet,
District: Kodagu,
State: Karnataka,
PIN Code: 571236,
Mobile: 9448796273



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

8995 0497 7092

VID : 9199 8215 9102 2059

ನನ್ನ ಆಧಾರ್. ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India

Aadhaar no. issued: 04/08/2015



ಧನುಷ್ ಶ್ರೀ ಬಿ ಡಿ
Dhanushree B D
ಜನ್ಮ ದಿನಾಂಕ/DOB: 17/07/2008
ಸ್ತ್ರೀ/FEMALE

ಆಧಾರ್ ಗುರುತಿನ ಪರಾವರ್ತಕವಾಗಿದೆ, ಪೌರತ್ವ ಅಥವಾ ಜನ್ಮ ದಿನಾಂಕದ ಪುರಾವೆ
ಇಲ್ಲ. ಇದನ್ನು ಆನ್‌ಲೈನ್ ವೈದಿಕರಣ ಅಥವಾ ಒನ್ ಕೋಡ್ / ಆಫ್‌ಲೈನ್ XML
ಇನ್ ಫೋರ್ಮೇಟ್‌ನಲ್ಲಿ ಮಾತ್ರ 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)

8995 0497 7092

ನನ್ನ ಆಧಾರ್. ನನ್ನ ಗುರುತು



ಕರ್ನಾಟಕ ಸರ್ಕಾರ
GOVERNMENT OF KARNATAKA

This is to certify that the below mentioned candidate has passed S.S.I.C. Examination

031331742

eng/qr/cst / Candidate Type: CCE REGULAR FRESH

माता/ Mother's Name : KUMARI B D

Gender: **GIRL**

	ಆಂತರಿಕ ಪರೀಕ್ಷೆ INTERNAL ASSESSMENT		ಬಾಹ್ಯ ಪರೀಕ್ಷೆ EXTERNAL EXAMINATION		ಒಟ್ಟು ಅಂಕಗಳು TOTAL MARKS			
ಶೈಕ್ಷಣಿಕ ವಿಷಯಗಳು SCHOLASTIC SUBJECTS	ನಿರ್ದಿಷ್ಟ ಅಂಕಗಳು MAX MARKS	ನಿರ್ದಿಷ್ಟ ಅಂಕಗಳು MARKS OBTAINED	ನಿರ್ದಿಷ್ಟ ಅಂಕಗಳು MAX. MARKS	ನಿರ್ದಿಷ್ಟ ಅಂಕಗಳು MARKS OBTAINED	ನಿರ್ದಿಷ್ಟ ಅಂಕಗಳು MAX. MARKS	ನಿರ್ದಿಷ್ಟ ಅಂಕಗಳು MIN. MARKS	ಒಟ್ಟು ಅಂಕಗಳು TOTAL MARKS	ದರ್ಜೆ GRADE
ಪ್ರಥಮ ಭಾಷೆ / FIRST LANGUAGE KANNADA	25	25	100	97	125	44	122	A+
ದ್ವಿತೀಯ ಭಾಷೆ / SECOND LANGUAGE ENGLISH	20	20	80	70	100	35	90	A+
ತೃತೀಯ ಭಾಷೆ / THIRD LANGUAGE HINDI	20	20	80	68	100	35	88	A
ಗಣಿತ / MATHEMATICS	20	20	80	46	100	35	66	B
ವಿಜ್ಞಾನ / SCIENCE	20	20	80	49	100	35	69	B
ಸಾಮಾಜಿಕ ವಿಜ್ಞಾನ / SOCIAL SCIENCE	20	20	80	70	100	35	90	A+
ಒಟ್ಟು ಅಂಕಗಳು / TOTAL MARKS	125	125	500	400	625	219	525	ಒಟ್ಟು / CGPA: A

Percentage /
Defectiveness (84%)

ಕ್ರ. ಸಂ. / Sl. No.	ಸಹ ಶೈಕ್ಷಣಿಕ ವಿಷಯಗಳು / CO-SCHOLASTIC SUBJECTS	ಗ್ರೇಡ್ / GRADE	ಕ್ರ. ಸಂ. / Sl. No.	ಸಹ ಶೈಕ್ಷಣಿಕ ವಿಷಯಗಳು / CO-SCHOLASTIC SUBJECTS	ಗ್ರೇಡ್ / GRADE
1.	ವೈಯಕ್ತಿಕ ಆರೋಗ್ಯ ಶಿಕ್ಷಣ / PHYSICAL & HEALTH EDUCATION	A	2.	ಮೌಲ್ಯಗಳ ಮತ್ತು ಮನೋಧರ್ಮ / ATTITUDE & VALUES	A
3.	ಕಾರ್ಯಾನುಭವ / WORK EXPERIENCE	A	4.	ಕಲಾ ಶಿಕ್ಷಣ / ART EDUCATION	A

[illegible]

KUDIGE, SOMWARPETE, KODAGU DISTRICT- 571232

Maryanne

4000

Chairperson