

**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

S H A L I N I

Middle Name

Last Name

Y O G E S H

B. Name (as per Aadhaar)

S H A L I N I Y

2. Gender (select one)☐ Tick

Male

☒ Tick

Female

☐ Tick

Transgender

3. Date of Birth

0

7

0

8

2

0

0

8

4. Aadhaar Number

6

2

0

5

7

1

9

2

7

3

6

4

5. Residence Address

Flat/Door/Building

C / O Y O G E S H

Road/Street/Block/Sector

K A T T A Y A H O B L I , K A L L A H A L L

Post Office

S E T T I H A L L I

Area/Locality/Town/City

H A S A N

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

2

8

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

9

6

4

5

9

2

2

6

7

(ii) Email ID

LEEMAROSESUPREME@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

Father's Middle Name

Father's Last Name

Y O G E S 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][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

SHALINI Y

a. I, SHALINI Y, 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...12/09/2026

Shri: 4

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

Name: **SHALINI Y**

Designation: **AUTHORIZED PERSON**



ಭಾರತ ಸರ್ಕಾರ
Government of India



ಸಾಲಿನಿ ಯ
Shalini Y
ಜನನ ದಿನಾಂಕ/DOB: 07/08/2008
FEMALE

6205 7192 7364

VID : 9175 9549 2596 5399

ನನ್ನ ಆಧಾರ್. ನನ್ನ ಗುರುತು



ಭಾರತೀಯ ಏಕೀಕೃತ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

Address:
D/O: ಯೋಗೇಶ್, ಕಟ್ಟಾಯಾ ಹೊಬ್ಬಿ, ಕೊಲಹಳ್ಳಿ ಗ್ರಾಮ,
ಹಸನ್ ಜಿಲ್ಲೆ, ಕರ್ನಾಟಕ - 573128

Address:
D/O: Yogenha, kattaya Hobli, Kollahally
Village, Settihalli, Hasan,
Karnataka - 573128



6205 7192 7364

VID : 9175 9549 2596 5399

1047

<https://uidai.gov.in>

www.uidai.gov.in



Z2LL02880

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



006122118

Year : 2024

ಅಭ್ಯರ್ಥಿ ಬಗೆ / Candidate Type : CCE REGULAR FRESH

ತಾಯಿಯ ಹೆಸರು / Mother's Name : **LEEMA ROSE**

ଡ଼ାଂ /
 Gender : **GIRL**

ಭಾಗ - ೧ / PART - A

ಗಣಿಸಿದ ಒಟ್ಟು ಅಂಕಗಳು (ಅಕ್ಷರಗಳಲ್ಲಿ) / TOTAL MARKS OBTAINED (IN WORDS):	FOUR HUNDRED SEVENTY-TWO ONLY	Percentage / ಶೇಕಡಾವಾರು :	(75.52%)
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Part - A / PART - B

KSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSEABKSE

HASSAN, H N PURA ROAD, HASSAN DISTRICT- 573201

Maryanne

ಅಧ್ಯಕ್ಷರು

Chairperson