



Sushmita Soren

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 U S H M I T A

Middle Name

Last Name

S O R E N

B. Name (as per Aadhaar)

S U S H M I T A S O R E N

2. Gender (select one)

Tick

Male

Tick

Female

Tick

Transgender

3. Date of Birth

0 3 0 9 2 0 0 7

4. Aadhaar Number

9 3 7 7 2 2 0 2 7 6 0 0

5. Residence Address

Flat/Door/Building

N O 4 7 H O U S E N O . 4 5 7 ,

Road/Street/Block/Sector

S U M U K H A B U I L D I N G

Post Office

M O T A P P A P A L Y A ,

Area/Locality/Town/City

I N D I R A N A G A R ,

District

B E N G A L U R U U R B A N

State/Union Territory

KARNATAKA

Country/Region

I N D I A

PIN / ZIP CODE

5 6 0 0 3 5

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

8 7 9 7 7 8 3 9 0 5

(ii) Email ID

ff3495014@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

M O T I L A L

Father's Middle Name

Father's Last Name

S O R E N

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]

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

Part F: Communication Address	
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Part G: Declaration by Applicant or by Representative Assessee on behalf of the Applicant

24. Documents submitted as Proof of Identity, Proof of Address of Representative Assessee

☐ Tick	(i) Proof of Identity	☐ Tick	(ii) Proof of Address
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SUSHMITA SOREN

a. I, _____, in the capacity of _____(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.BENGALURU URBAN

Date...15/09/2026

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

Name: _____ SUSHMITA SOREN

Designation: _____ AUTHORIZED PERSON



भारत सरकार
Government of India



Issue Date: 26/10/2013



सुस्मिता सोरेन
Sushmita Soren
जन्म तिथि/DOB: 03/09/2007
महिला/ FEMALE

9377 2202 7600

VID : 9184 0231 7069 3730

मेरा आधार, मेरी पहचान



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

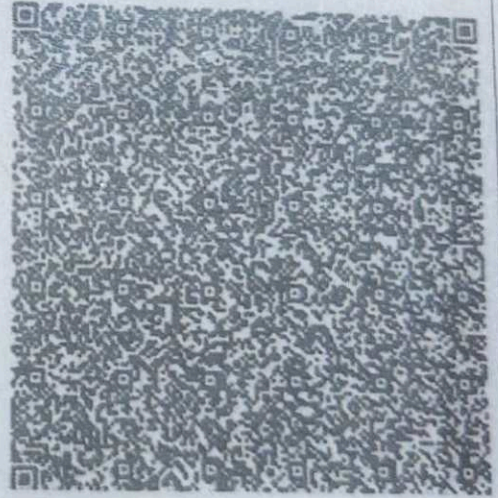


पता:

द्वारा: मोती लाल सोरेन, डुंगरीडीह, धोबानी, पूर्वी सिंहभूम,
झारखण्ड - 832104

Address:

C/O: Moti Lal Soren, Dungrih, Dhobani, East
Singbhum,
Jharkhand - 832104



9377 2202 7600

VID : 9184 0231 7069 3730



1947



help@uidai.gov.in



www.uidai.gov.in



Name/ नाम

Sushmita Soren

सुस्मिता सोरेन

Abha Number/ आभा-संख्या

91-2754-6030-3272

Abha Address/ आभा पता

sushmita.soren3124@abdm



Gender/ लिंग

Female / महिला

Date Of Birth/ जन्मतिथि

03-09-2007

Mobile/ मोबाइल

6206597302

Instructions

Toll-Free Number: 1800 114 477

- With this ABHA you have become a part of India's digital health ecosystem.
इस आभा के साथ आप भारत के डिजिटल हेल्थ इकोसिस्टम का हिस्सा बन गए हैं।
- ABHA provides you a unique identification and helps in storing - safekeeping all your digital health records at one place.
आभा आपको एक विशिष्ट पहचान प्रदान करता है और आपके सभी डिजिटल स्वास्थ्य रिकॉर्ड को सुरक्षित एक ही स्थान पर संग्रहीत रखने में मदद करता है।
- You can download the ABHA mobile app, Aarogya Setu or other ABDM enabled app to view and share your digital health records with ABDM registered healthcare service providers.
आप एबीडीएम पंजीकृत स्वास्थ्य सेवा प्रदाताओं के साथ अपने डिजिटल स्वास्थ्य रिकॉर्ड देखने और साझा करने के लिए आभा मोबाइल ऐप, आरोग्य सेतु या अन्य एबीडीएम सक्षम ऐप डाउनलोड कर सकते हैं।
- If this card is lost kindly download it from www.abha.abdm.gov.in, it is digitally acceptable.
यदि यह कार्ड खो जाता है तो कृपया इसे www.abha.abdm.gov.in से डाउनलोड करें, यह डिजिटल रूप से स्वीकार्य है।