

**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 M M U

Middle Name

Last Name

B E G U M

B. Name (as per Aadhaar)

S H A M M U

B E G U M

2. Gender (select one)☐ Tick

Male

☒ Tick

Female

☐ Tick

Transgender

3. Date of Birth

2

0

1

1

2

0

0

9

4. Aadhaar Number

2

0

2

7

7

6

7

9

9

0

1

2

5. Residence Address

Flat/Door/Building

4 G 3 P + G G ,

M E D I

A G R A H A R A

Road/Street/Block/Sector

M E D I

A G R A H A R A ,

Post Office

M E D I

A G R A H A R A ,

Area/Locality/Town/City

M E D I

A G R A H A R A

V I L L A G E

R D

District

B E N G A L U R U

R U R A L

State/Union Territory

KARNATAKA

Country/Region

I N D I A

PIN / ZIP CODE

5 6 0 0 8 9

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

5

3

8

0

6

8

3

6

0

(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

R A M J A N

Father's Middle Name

Father's Last Name

S A B

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]

18. Permanent Account Number (if any)

19. Aadhaar Number (if Permanent Account Number is not available)	7	4	2	1	4	0	3	3	1	7	8	8
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20. Representative Assessee Address	
Flat/Door/Building	4 G 3 P + G G , M E D I A G R A H A R A
Road/Street/Block/Sector	M E D I A G R A H A R A ,
Post Office	M E D I A G R A H A R A V I L L A G E R D
Area/Locality/Town/City	M E D I A G R A H A R A V I L L A G E R D
District	B E N G A L U R U R U R A L
State/Union Territory	KARNATAKA Country/Region INDIA PIN / ZIP CODE 5 6 0 0 8 9

[illegible]

22. Address for Communication (select one) ☐ Tick Residence Address ☒ Tick Representative Assessee Address ☐ Tick 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

SHAMMIL BEGUM

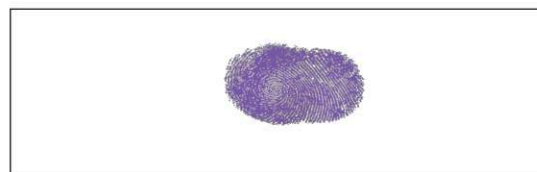
SHAMMU BEGUM

a. I,, in the capacity of REPRESENTATIVE ASSESSEE
(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 RURAL

Date. 02/10/2026



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

Name: SHAMMU BEGUM

Designation: REPRESENTATIVE ASSESSEE



ಭಾರತ ಸರ್ಕಾರ
Government of India

Aadhaar no. issued: 16/12/2015



ಶಾಮ್ ಬೆಗುಂ

Shammu Begum

ಜನ್ಮ ದಿನಾಂಕ/DOB: 20/11/2009

ಸ್ತ್ರೀ / FEMALE

ಆಧಾರ್ ಗುರುತಿನ ಪುರಾವೆಯಾಗಿದೆ, ಪೌರತ್ವ ಅಥವಾ ಜನ್ಮ ದಿನಾಂಕದ ಪುರಾವೆ
ಅಲ್ಲ. ಇದನ್ನು ಆನ್‌ಲೈನ್ ದೃಢೀಕರಣ ಅಥವಾ QR ಕೋಡ್ / ಆಫ್‌ಲೈನ್ XML
ಸ್ಕ್ಯಾನಿಂಗ್‌ನೊಂದಿಗೆ 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)

2027 7679 9012

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



Name/ ಹೆಸರು

Shammu Begum

ಶಾಮ್ಮು ಬೆಗುಂ

Abha Number/ ಅಭಾ ಸಂಖ್ಯೆ

91-2211-0607-2715

Abha Address/ ಅಭಾ ವಿಳಾಸ

shammu.begum@abdm



Gender/ ಲಿಂಗ
Female / ಹೆಣ್ಣು

Date Of Birth/ ಹುಟ್ಟಿದ ದಿನಾಂಕ
20-11-2009

Mobile/ ಮೊಬೈಲ್
9538068360



ಭಾರತೀಯ ಏಕೀಕೃತ ಗುರುತು ಅಧಿಕಾರ

ಭಾರತ ಸರ್ಕಾರ

Unique Identification Authority of India
Government of India

ನೋಂದಾವಣೆ ಕ್ರಮ ಸಂಖ್ಯೆ / Enrollment No.: 2086/13023/60908

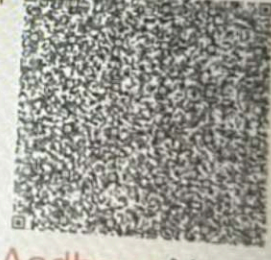
To,
ರಂಜನ್ ಸಾಬ್
Ramjan Sab
S/O Husen Sab
No 121
J K Basavanna Nagar
Hesaraghatta Road Medi Agrahara Bangalore North
Vidyaranyapura Bangalore North Bengaluru
Karnataka 560097
9845401532

14/08/2014

Ref: 250 / 12M / 87293 / 87576 / P



SB850949965FH



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

7421 4033 1788

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ರಂಜನ್
Ramjan Sab
ಜನ್ಮ ದಿನಾಂಕ / DOB : 10/07/1978
ಪುರುಷ / Male



7421 4033 1788

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು