



Ismitara Khatun

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

I S M O T A R A

Middle Name

Last Name

K H A T U N

B. Name (as per Aadhaar)

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

2. Gender (select one)

☐ Tick

Male

☒ Tick

Female

☐ Tick

Transgender

3. Date of Birth

1 7

1 2

2 0 0 6

4. Aadhaar Number

3 9 0 7 3 2 8 8 3 8 6 3

5. Residence Address

Flat/Door/Building

S H O P N O 8 / 9 , C H A I R M A N L A

Road/Street/Block/Sector

9 T H M A I N R D , H R B R L A Y O U T

Post Office

, S U B B A I A H N A P A L Y A , B A N A S

Area/Locality/Town/City

B A L A J I L A Y O U T , S U B B A I A H N

District

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

State/Union Territory

K A R N A T A K A

Country/Region

I N D I A

PIN / ZIP CODE

5 6 0 0 4 3

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 9 5 1 8 2 1 9 3 6

(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

S A H E B

Father's Middle Name

Father's Last Name

S K

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

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

[illegible]

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

☒ (i) Proof of Identity ☒ (ii) Proof of Address ☒ (iii) Proof of Date of Birth

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

a. I, ISMOTARA KHATUN, 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. BENGALURU RURAL

Date..06/10/2026

Ismotara khatun

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

Name: ISMOTARA KHATUN

Designation: **AUTHORIZED PERSON**



भारत सरकार
GOVERNMENT OF INDIA



Ismotara Khatun

जन्म तिथि/DOB: 17/12/2006

महिला/FEMALE

3907 3288 3863

VID : 9129 8823 8645 8136

मेरा आधार, मेरी पहचान



Name/ नाम
Ismotara Khatun

Abha Number/ आभा-संख्या
91-1546-5684-1231

Abha Address/ आभा पता
91154656841231@abdm



Gender/ लिंग
Female

Date Of Birth/ जन्मतिथि
17-12-2009

Mobile/ मोबाइल
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