A125982629

Application Number: A125982629
Payment Reference: UTIXFFYEO41923442938 / PY0183357930
Payment Date: 14/11/2026 Rs.107.00/-

Inward Number Bar Code

Application Source: EWALLET - B48 - RAR ONLINEPSA COMMUNICATIONS PVT LTD
Application Date: 14/11/2026

User Id: SKMAH10723 **User Name:** SKMAH10723

PAN CARD MODE : Both physical PAN and e-PAN Card | Application Mode : Physical Application





FORM NO. 93
[See rule 158]
Application for Allotment of Permanent Account Number
[For an Individual being a Citizen of India]

S. No.		PART A - Personal Information
1	**A. Name** First Name Middle Name Last Name	ASMAUL SK
	B. Name *(as per Aadhaar)*	ASMAUL SK
2	**Gender** *(select one)*	☑ Male ☐ Female ☐ Transgender
3	**Date of Birth**	12 11 1998
4	**Aadhaar Number**	897529764239
5	**Residence Address** Flat/Door/Building Road/Street/ Block/Sector Post Office Area/Locality/Town/City District State/Union Territory	C/O SAYEMA BHAIRABDANGA AMTALA FARAKKA MURSHIDABAD WEST BENGAL PIN/ZIPCODE 742202 Country/Region INDIA
6	**Office Address** Flat/Door/Building Road/Street/ Block/Sector Post Office Area/Locality/Town/City District State/Union Territory	PIN/ZIPCODE Country/Region
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 (ii) Email ID (iii) Landline No. with STD Code *(if any)*	Country Code 91 Mobile Number 9931015743 ks650607@gmail.com Area/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 name First Name Middle Name Last Name	
14	Mother's Name First Name Middle Name Last Name	S A Y E M A
15	Name of parent to be printed on Permanent Account Number card *(select one)*	☐ Father ☑ Mother

PART D - Assessing Offcer Code (AO Code)

16	AO Code Details	(i) Area Code: W B G (ii) AO Type: W (iii) Range Code: 1 5 6 (iv) AO No.: 9 3

PART E- Representative Assessee, if applicable

17	Representative Assessee Name First Name Middle Name Last Name	
18	Permanent Account Number *(if any)*	
19	Aadhaar Number *(if Permanent Account Number is not available)*	
20	Representative Assessee Address Flat/Door/Building Road/Street/ Block/Sector Post Office Area/Locality/Town/City District State/Union Territory	PIN/ZIPCODE Country/Region
21	Contact Details (i) Mobile Number (ii) Email ID (iii) Landline No. with STD Code *(if any)*	Country Code / Mobile Number Area/STD Code / Landline Number

Part F: Communication Address

22	Address for Communication *(select one)*	☑ Residence Address ☐ Representative Assessee Address ☐ Office Address

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

23	Documents submitted as Proof of Identity, Proof of Address and Proof of Date of Birth of the Applicant	
	(i) Proof of Identity	AADHAAR Card issued by UIDAI (In Copy)
	(ii) Proof of Address	AADHAAR Card issued by UIDAI (In Copy)
	(iii) Proof of Date of Birth	Voters ID card (In Copy)
24	Documents submitted as Proof of Identity, Proof of Address of Representative Assessee	
	(i) Proof of Identity	
	(ii) Proof of Address	

Verification & Declaration

a. I, ASMAUL SK, 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.

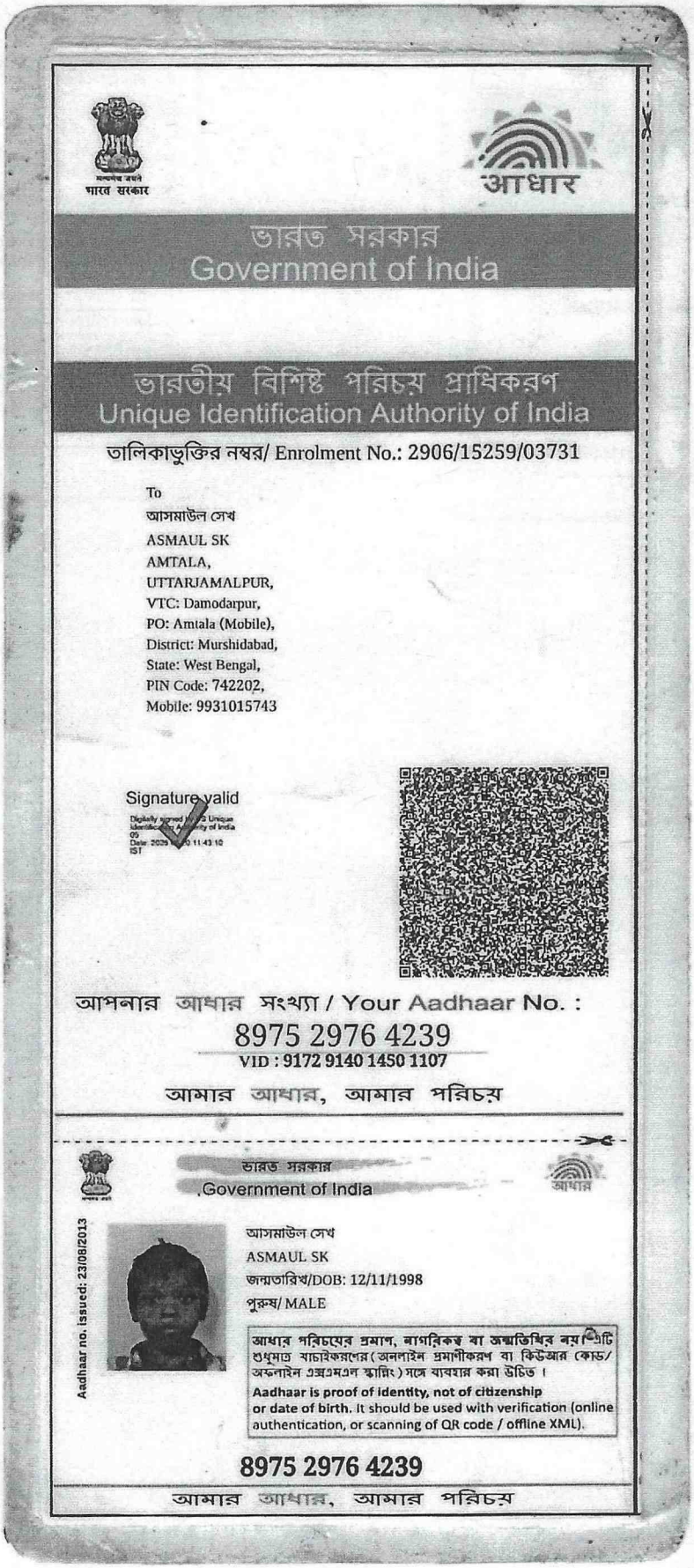
Place MURSHIDABAD

Date 14/11/2026

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

Name: ASMAUL SK

Designation: SELF



ভারত সরকার
Government of India

ভারতীয় বিশিষ্ট পরিচয় প্রাধিকরণ
Unique Identification Authority of India

তালিকাভুক্তির নম্বর/ Enrolment No.: 2906/15259/03731

To
আসমাউল সেখ
ASMAUL SK
AMTALA,
UTTARJAMALPUR,
VTC: Damodarpur,
PO: Amtala (Mobile),
District: Murshidabad,
State: West Bengal,
PIN Code: 742202,
Mobile: 9931015743

Signature valid

আপনার আধার সংখ্যা / Your Aadhaar No. :
8975 2976 4239
VID : 9172 9140 1450 1107

আমার আধার, আমার পরিচয়

ভারত সরকার
Government of India

Aadhaar no. issued: 23/08/2013

আসমাউল সেখ
ASMAUL SK
জন্মতারিখ/DOB: 12/11/1998
পুরুষ/ MALE

আধার পরিচয়ের প্রমাণ, নাগরিকত্ব বা জন্মতিথির নয়। এটি শুধুমাত্র যাচাইকরণের (অনলাইন প্রমাণীকরণ বা কিউআর কোড/ অফলাইন এক্সএমএল স্ক্যানিং) সঙ্গে ব্যবহার করা উচিত।
Aadhaar is proof of identity, not of citizenship or date of birth. It should be used with verification (online authentication, or scanning of QR code / offline XML).

8975 2976 4239

আমার আধার, আমার পরিচয়

ভারতের নির্বাচন কমিশন
পরিচয় পত্র
ELECTION COMMISSION OF INDIA
IDENTITY CARD

WRI1855378



নির্বাচকের নাম : অসমাউল সেখ

Elector's Name : Asmaul Sk

মাতার নাম : সায়েমা

Mother's Name : Sayema

লিঙ্গ/Sex : পুং / M

জন্ম তারিখ : 12/11/1998

Date of Birth

WRI1855378

ঠিকানা:
ইমাম নগর, গোহিলবাড়ী, ফরাক্কা,
মুর্শিদাবাদ-742202

Address:
IMAM NAGAR, GOHILBARI, FARAKKA,
MURSHIDABAD-742202

Date: 24/01/2019

55 - ফরাক্কা নির্বাচন ক্ষেত্রের নির্বাচক নিবন্ধন আধিকারিকের স্বাক্ষরের অনুকৃতি

Facsimile Signature of the Electoral Registration Officer for

55 - Farakka Constituency

ঠিকানা পরিবর্তন হলে নতুন ঠিকানায় ভোটার লিষ্টে নাম তোলা ও একই নম্বরের নতুন সচিত্র পরিচয়পত্র পাওয়ার জন্য নির্দিষ্ট ফর্মে এই পরিচয়পত্রের নম্বরটি উল্লেখ করুন।

In case of change in address mention this Card No. in the relevant Form for including your name in the roll at the changed address and to obtain the card with same number

103 / 1160