

Recent colour
photograph of the applicant
(4.5 cm x 3.5 cm)
with Sign/Left thumb
impression across the photo of
the applicant

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

Recent colour
photograph of the applicant
(4.5 cm x 3.5 cm)

Sr. No.

PART A - Personal Information

1. A. Name

First Name

Middle Name

Last Name

B. Name (as per Aadhaar)

2. Gender (select one)

☐ Tick

Male

☐ Tick

Female

☐ Tick

Transgender

3. Date of Birth

d

d

m

m

y

y

y

y

4. Aadhaar Number

5. Residence Address

Flat/Door/Building

Road/Street/Block/Sector

Post Office

Area/Locality/Town/City

District

State/Union Territory

Country/Region

PIN / ZIP CODE

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

Mobile Number

(ii) Email ID

(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

15. Name of parent to be printed on Permanent Account Number card (select one) ☐ Tick Father ☐ Tick Mother

16. Assessing Officer (AO Code)	(i) Area Code				(ii) AO Type		
	(iii) Range Code				(iv) AO No.		

[illegible][illegible][illegible]

(i) Mobile Number	Country Code		Mobile Number	
(ii) Email ID				
(iii) Landline No. with STD Code <i>(if any)</i>	STD Code		Landline Number	

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

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

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

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.....

Date.....

Designation: