

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)**

Male  Female  Transgender

**3. Date of Birth**

/   -

**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)**

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

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)**

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 First Name**

Father's Middle Name

Father's Last Name

14. Mother's First Name	
Mother's Middle Name	
Mother's Last Name	

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

**PART D - Assessing Officer (AO Code)**

16. Assessing Officer (AO Code)

(i) Area Code	<input type="text"/>	(ii) AO Type	<input type="text"/>
(iii) Range Code	<input type="text"/>	(iv) AO No.	<input type="text"/>

**PART E- Representative Assessee, if applicable**

17. RA's First Name

RA's Middle Name

RA's 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  Country/Region  PIN / ZIP CODE

21. 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 F: Communication Address**

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

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

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

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

**Verification & Declaration**

a. I, ....., in the capacity of .....(Representative Assessee/Authorized Representative) 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.....

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

Name: \_\_\_\_\_

Designation: \_\_\_\_\_