



Handwritten signature/initials

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

JAMES

Middle Name

SUMJAR

Last Name

BOSE

B. Name (as per Aadhaar)

JAMES SUMJAR BOSE

2. Gender (select one)

Male Female Transgender

3. Date of Birth

18 12 2015

4. Aadhaar Number

249597635294

5. Residence Address

Flat/Door/Building

YEKJUM BOSE

Road/Street/Block/Sector

LITE BOSE

Post Office

DARAK

Area/Locality/Town/City

DARAK CIRCLE

District

WEST SANGANAI

State/Union Territory

ARUNACHAL PRADESH

Country/Region

INDIA

PIN / ZIP CODE

790001

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

71085489670

(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

YEKJUM

Father's Middle Name

Father's Last Name

BOSE

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) Father Mother

PART D - Assessing Officer (AO Code)

16. Assessing Officer (AO Code)

(i) Area Code (ii) AO Type

(iii) Range Code (iv) AO No.

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) 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 (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


Verification & Declaration

a. I, JAMES, 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 Itanagar

Date: 06.04.2026



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

Name: JAMES SUMJAR

Designation: Itanagar



भारत सरकार
Government of India



आधार



James Jumjar Boje
DOB : 18/12/2015
Male

2495 9753 5294

मेरा आधार, मेरी पहचान

Issue Date : 07/09/2021



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India



AADHAAR

Address: C/O: Yekjum Boje, Village-
Lite Boje, Po- Darak, Darak Circle,
West Siang, Arunachal Pradesh,
791001



2495 9753 5294



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Print Date : 13/09/2021



भारत सरकार

Government of India



YEKJUM BOJE

Father : YOMYEK BOJE

DOB : 15/02/1995

Male



4277 6726 7792

मेरा आधार, मेरी पहचान



भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India

Address:

S/O: Yomyek Boje, DARAK, Boje Lite, Along, West Siang,
Arunachal Pradesh, 791001

4277 6726 7792



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GOVERNMENT OF
ARUNACHAL PRADESH
DEPARTMENT OF ECONOMICS
AND STATISTICS

BIRTH CERTIFICATE



(Issued under Section 12/17 of the Registration of Births and death act, 1969 and rule 9/14 of the Arunachal Pradesh Registration of Births and Deaths Rules 2001)

This is to certify that the following information has been taken from the original record of birth which is the register for (local area/local body) **Local Area of Tahsil/block Yomcha** of District **West Siang** of State **Arunachal Pradesh**.

Name: James Jumjer Boje

Sex : M

Date of Birth: 18/12/2015

Place of Birth: Lite Boje

Name of Mother: Lukjak Boje

Name of father: Yekjum Boje

Address of parents at the time of birth of the child:

Permanent address of parents:

Village: Lite Boje

Village: Lite Boje

PO/PS: Darak/Kamba

PO/PS: Darak/Kamba

DIST : West Siang

DIST : West Siang

STATE: Arunachal Pradesh

STATE: Arunachal Pradesh

Registration No. : YMC/BD-05/2019/

Date of Registration: 30/01/2019

Remarks (if any): NIL

Signature of the issuing authority

Address of the issuing authority

Date of issue: 30/01/2019

Yomcha (A.P.)

Seal:-

"Ensure registration of every birth and death"