

FORMAT
Application for correction to particulars entered in electoral roll
(to be filed only by the person to whom that entry relates)

To,
 The Electoral Registration Officer/Authorized Officer,
 Zilla Parishad Constituency.

(I) Name of the applicant –

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EPIC Number _____

Mobile No. of Self (if available) (or)
 Of relative mentioned

(II) Please correct my following details in the electoral roll in _____ No Ward of _____
 Gaon Panchayat.

(Maximum of 4 entries can be corrected)

(Tick the appropriate boxes)

Copy of self-attested Documentary Proof in support of claim to be attached.

1. Name 2. Gender 3. DoB/Age 4. Relation Type 5. Address 6. Relation Name

The correct particulars in the entry to be corrected are as under:-

Name of the Document(s) in support of above claim attached

DECLARATION

I HEREBY DECLARE that to the best of my knowledge and belief that I am aware that making a statement or declaration in relation to this application which is false and which I know or believe to be false or do not believe to be true, is punishable under Section 31 of Representation of the People Act, 1950 (43 of 1950) with imprisonment for a term which may extend to one year or with fine or with both.

Date _____

Place _____

Signature of Applicant/Left Hand Thumb Impression

Accessibility Instructions:- In the light of provisions of Rights of Persons with Disabilities Act 2016 and Rights of Persons with Disabilities Rules, 2017, in case of persons with intellectual disability, autism, cerebral palsy and multiple disabilities etc., signature or left hand thumb impression of person with disability, or signature or left hand thumb impression of his/her legal guardian will be required.

.....(Perforation).....

⌘ Acknowledgement/Receipt for application ⌘

Acknowledgment Number _____

Received the application in the Format of Shri/Smt./Ms _____

Signature of ERO/AERO/Authorized Officer