## FORM 8 [See rule 13(1) and 26]

Application for correction to pa	ırtici	ılars entere	ed in e	lectoral ro	ll					
То										
The Electoral Registration Officer.  SPACE FOR PASTING ONE										
	٦ .	Æ		_					T PASSPORT SIZE HOTOGRAPH	
	Ass	sembly/ Pa	arliam	entary Con	stitue	ency.		(3.5 CM X	X 3.5 CM) SHOWING AL VIEW OF FULL	
FRO								WITHIN THIS BOX		
Sir,							L			
I request that entry relating	to m	vself annea	aring i	n the electo	ral re	oll the	abox	ve Cons	stituency is not	
correct and it should be corrected		• • •	_						•	
I. Applicant's Name	<i>.</i>	offeet parts	i carar.	у по вирроге	. 01 111	•		e (if any)		
details						Duili	arric	(II dily	<i>)</i>	
Part number of electoral roll:				Serial nun	ah an i	n that		-•		
	٦,,	<b>3</b> 7			nber i	n that	-		(C 1 / 1	
Age as on 1 <sup>st</sup> January	#	Years:		Months:					female/others)	
Date of birth, if known:		Day:		Month:		I	Yea		<del>.</del>	
* Father's/	1	Vame				Surn	ame	(if any	)	
Mother's/ Name										
Husband's										
II. Particulars of place of pro	esen	t ordinary	Resid	lence (Full	addı	ess)				
House/ Door number:										
Street/ Area/Locality/Mohalla/F	Road	:								
Town/ Village:										
Post Office:				Pin Code:						
Tehsil/ Taluka/Mandal/ Thana:										
District:										
III. Details of Elector's Photo	Iden	tity Card	(if issu	ued, in this	or s	ome o	ther	· consti	tuency)	
Elector's Photo Identity Card no	umb	er:		·					•	
Name of the Constituency:										
IV. Details of entries to be cor	rect	ed:								
			d's na	me/ *Sex/	*Add	lress/	*Ele	ctor's F	Photo Identity	
*My name / *Age/ *Father's/Mother's/Husband's name/ *Sex/ *Address/ *Elector's Photo Identity Card Number may be corrected in terms of information provided in this Form above.										
				<u> </u>						
	$\neg$									
Place:										
Date: Signature or thumb impression of the elector										
Please give your mobile number / E-mail I.D (Optional)/										
Note- Any person who makes						falsa	and	which	he either	
knows or believes to be false of										
Representation of People Act,				be it ut, is	, բաո	1911AD	ıc ul	iuci st	CHUII JI UI UIC	
f		,	•	- A 1 1	1	41 C4	_4.	CT.	0 17 1	
In case of Union territories having no Legislative Assembly and the State of Jammu & Kashmir.										
# Please give the year i.e. 2007, 2008, etc.										
* Strike out the inappropriate	alte	rnative. 🗀						_		

Details of action taken	
(To be filled by Electoral Registration Officer	of the constituency)
(10 be filled by Electoral Registration Officer	of the constituency)
The application of Shri/Smt./Km. correction of entry in the electoral roll in Form 8 has been accepted	. for
correction of onery in the electoral for in Form of has been decepted	A rejected.
Detailed reasons for *acceptance [under or in pursuance of rule 18 or in pursuance of rule $17*/20*/26(4)^{£}$ ].	8*/20*/26(4) <sup>£</sup> ] or *rejection [under
Place: Signature of Date: Electoral Registration Officer	(Seal of the Electoral
Date: Electoral Registration Officer	Registration Officer)
* Strike out the inappropriate alternative. £ During continuous updating after final publication of electoral r	oll.

Remarks of Field Level Officers (e.g BLO, Designated Officer, Supervisory Officer)

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## **Intimation of action taken**

(Section-II of the page is to be filled by Electoral Registration Officer of the constituency and to be posted to the applicant on the address as given by the applicant in Section-I)

	First Fold				
					Postage Stamp to be affixed by the
					Electoral Registration Authority at the time of dispatch
The application in Form 8					or disputeir
**Shri/ Shrimati/ Kumari					
** (Full address)					
House/ Door number:					
Street/ Area/Locality/					
Mohalla/Road:					
Town/ Village:					
Post Office:			Pin Cod	le:	
Tehsil/ Taluka/					
Mandal/ Thana:					
District:					
** To be filled in by the a		Saa	and Fold		
	,	Sec	ona roia		Section-II
					Section II
has been—					
(a) (a) accepted and the en	ntry at Sr. No	of F	Part No		
of AC No	has been modifie	ed accordingly.			_
(b) rejected for the reason					
Data			El	aatoro	1 Pagistration Officer
Date.			El	ectora	l Registration Officer. (Address
					(Address
		Pertoration for	detachment		
	Receij	pt for application	on		_
Received the application	in Form 8 of ** Shri	/Shrimati/Kuma	ri		
**Address.		/ Sili illiati/ Kullia	.11.		
_		~.	2.1. 22		
Date		_			iving the application
		on behalf (Address)		orai Ke	egistration Officer
** To be filled in by the a	nnlicent	(Addiess)	<b>'</b>		