

FORM-6

(See Rules 13(1) and (26) of the Registration of Electors Rules, 1960)

ELECTION COMMISSION OF INDIA

Application Form for New Voters

Acknowledgement No.S2437806N2511231200007

(To be filled by office)

To, The Electoral Registration Officer, No. & Name of Assembly Constituency Or No. & Name of Parliamentary Constituency@ (@Only for Union Territories not having Legislative Ass I submit application for inclusion of my name in the ele	• ,	ove constituency.	No. No.	378	Name: Mohammadabad Name:	
(1)(a.) Name (In Official Language of State) First Name followed by Middle Name अजय कुमार Surname (if any) যাৱৰ (1)(b.) Name (In English in BLOCK LETTERS) First Name followed by Middle Name AJAY KUMAR Surname (if any) YADAV Disclaimer: If name not filled in English, it will be translite	rated by software.					
*(2)(a.) Name and Surname (in official language of State) of any one of the relatives:- Father						
(3) Mobile No. of Self (if available). Of relative mentioned at Item No. 2	7 3	4 7	6 3 3	3 3	0 9 -	
(4) Email ID of Self (If available) erajayky@gmail.com Or Of relative mentioned at Item No. 2						
(5) Aadhaar Details	2 7	4 3 1	3 5 2	0 8	5 1	
(6) Gender		MALE	FEMALE		THIRD GENDER	
(7)(a.)Date of Birth (dd/mm/yyyy) 1 1 1 0 5 / 2 0 0 3 (b.) Self attested copy of document supporting age proof attached (anyone of the following) (i) Document for Proof of Date of Birth ^:- (Any one of these)						
Birth certificate issued by Competent Aadhaar Card Certificates of Class X or Class XII issued by (ii) Any Other Document for Proof of Date of Birth:- (If no	CBSE/ICSE/ State E	PAN Card ducationBoards, if it contain Dat			Driving License Indian Passport	

(8) (a.) Present Ordinary Residence (Full Address)							
House/Building/Apartment No. 8 8	Street/Area/Locality. east पूर्व						
Tehsil/Taluqa/Mandal sewrai सेवराय	Town/Village athahatha अथहथा						
Post Office athahatha अंग्ह्या	State/UT Uttar Pradesh						
District Ghazipur	Pin Code 232333						
(b.) Self-attested copy of address proof either in the name of applicant or any one of parents/spouse/adult child, if (i) Document for proof of residence ^:-	already enrolled as elector at the same address (Attach anyone of them)						
Water/Electricity/Gas connection Bill for that address(atleast 1 year)							
2. Aadhaar Card 3. Current passbook of Nationalized/Scheduled Bank/Post Office 4. Indian Passport							
5. Revenue Department's Land Owning records including Kisan Bahi 6. Registered Rent Lease Deed(Incase of tenant)							
7. Registered Sale Deed(incase of own house)							
(ii) Any Other Document for Proof of residence:- (If no document is available) (PI. Specify)							
(9)Category of disability, if any (Optional)	Visual Deaf & Dumb						
If any other (Give description):-							
2.1, 0.1.0. (0.1.0 2001), 1							
Percentage of disability % Certificate attached (Tick the appropriate box) Yes	es No						
(10)The details of my family member already included in the electoral roll at current address with whom I currently	reside are as under						
Name of family member: Relationship with applicant:	His/her EPIC no.						
DECLARATION							
I HEREBY DECLARE that to the best of my knowledge and belief-							
(i) I am a citizen of India and place of my birth is:- Town/Village athahatha							
District: Ghazipur	State/UT: Uttar Pradesh						
(ii) I am ordinarily a resident at the address mentioned at Sr. No. 8(a) in Form 6 since: 2003-05 (iii) I am applying for inclusion in Electoral Roll for the first time and my name is not included in any Assembly Co	nstituency/ Parliamentary Constituency.						
(iv) I don't possess any of the documents of age proof. Therefore, I have enclosed: (Name of the document) in su							
(v) I am aware that making the above statement or declaration in relation to this application which is false and when the People Act, 1950 (43 of 1950) with imprisonment for a term which may extend to one year or with fine or with	• •						
DATE:25-11-2023	DOUI.						
PLACE :NIT JALANDHAR							
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.							
Note-							
* In case of a married female applicant, name of Husband may preferably be mentioned.							
^ Submission of self-attested copy of document will ensure speedy delivery of services.							
# In case none of the documents is available, field verification is must. As for example, category like homeless Indian citizens who are otherwise eligible to become electors but do not possess any documentary proof of							
ordinary residence, Electoral Registration Officer shall designate an officer for field verification.							
Acknowledge	ment/Receipt						
Acknowledgement Number \$2437806N2511231200007 DATE 25-11-2023							
Received the application in Form 6 of Shri/Smt./Ms. Ajay Kumar Yadav अजय कुमार यादव							
[Applicant can refer the Acknowledgement No. to check the status of application]							
C. Transcription of the state of application							
*** This is a computer generated document and does not require signature ***							