To be printed on plain A4 paper si	ize; Not required to print on lett	ter head;	[3]	10	2022
	R	esident's Detail	S		
Aadhaar Number: [For update only] Full Name: [n-Resident Indian (NRI) New Er	nrolment	Update Request
C/o: House No./ Bldg./ Apt: Street/ Road/ Lane: Landmark:	JSTAK ALI				
Area/ Locality/ Sector: Village/ Town/ City: Post Office: District: State:	SHAMZI U.P.	GIVJRI	महरोज		
PIN Code: Date of Birth:		990	Signature of the Reside Thumb/ Finger Impress	ion	THE CASE
	Certifier's Detail	ls (To be filled by	the certifier Only		A OVER THE RESIDENCE OF THE PARTY OF THE PAR
Name of the Certifier:	RUBINA				
Designation: Office Address:	LOHARIPU	PAR DHAI JR	V		
I hereby certify above mentioned details of the resident and I am a (Tick appropriate box below) Gazetted Officer - Group A		No overwriting	Checklist for I ssue date is filled Cross signed and cross stam	Resident's signat	ture Certifier's details
Village Panchayat Head or Mukhiya Gazetted Officer - Group B MP/ MLA/ MLC/ Muncipal Councilor Tehsildar Head of Recognized Educational Institution Superintendent/ Warden/ Matron/ Head of Institution of Recognized shelter homes/ Orphanages EPFO Officer		प्रधान Rubing ग्राम-लोहिरपुर वि०ख० कॉधला जिला शामली			

CERTIFICATE FOR AADHAAR ENROLMENT/ UPDATE

Instructions: All details to be filled in Block Letters

(To be valid for 3 months from date of issue)

NOTE: This format is applicable for POI documents at SI. Nos. 17, 20, 21, 22, 31 & 32; POA documents at SI. Nos. 23, 24, 37, 38, 44 & 45; POR documents at SI. Nos. 13 & 14 DOB documents at SI. Nos. 4, 5, 14 & 15 of Schedule II of the Aadhaar (Enrolment and Update) Regulations, 2016, as amended from time to time.