



# ELECTION COMMISSION OF INDIA

## FORM-6

(See Rules 13(1) and 26) of Registration of Electors Rule-1960

### ***Application for Inclusion of Name in Electoral Roll for First time Voter OR on Shifting from One Constituency to Another Constituency.***

To, The Electoral Registration Officer, NCT OF Delhi TRILOK PURI Assembly / Parliamentary Constituency					
I request that my name be included in the electoral roll for the above Constituency. (✓) <b>first time voter</b> Particulars in support of my claim for inclusion in the electoral roll are given below:-					
<b><u>Mandatory Particulars</u></b>					
(a) Name		SANYOGITA			
(b) Surname (if any)		PATEL		पटेल	
(c) Name and surname of Relative of Applicant [see item (d)]		MAHENDRA PATEL			महेंद्र पटेल
(d) Type of Relation		Father <input type="checkbox"/> Mother <input type="checkbox"/> Husband <input checked="" type="checkbox"/> Wife <input type="checkbox"/>			
(e) Age [as on 1st January of current calendar year <b>2022</b> ]					
(f) Date of Birth (in DD/MM/YYYY format) (if known)		15/05/1988			
(g) Gender of Applicant (Tick appropriate box)		Male <input type="checkbox"/> Female <input checked="" type="checkbox"/> Third Gender <input type="checkbox"/>			
(h) Current address where applicant is ordinarily resident		House No.		B-1/260	
				बी-1/260	
Street/Area/Locality		STREET NO.8		स्ट्रीट नं.8	
Town/Village		NEW ASHOK NAGAR		न्यू अशोक नागर	
Post Office		VASUNDHRA ENCLAVE		वसुंधरा एंक्लेव	
				Pin Code 110096	
District		EAST		State/UT NCT OF Delhi	
(i) Permanent address of applicant		House No.			
Street/Area/Locality					
Town/Village					
Post Office				Pin Code	
District				State/UT	
(j) EPIC No. (if issued)					
<b><u>Optional Particulars</u></b>					
(k) Disability (if any)		Visually Impaired <input type="checkbox"/> Speech hearing disabled <input type="checkbox"/> Locomotor disability <input type="checkbox"/> Other _____			
(l) Email id (optional)		vickeypandey25669@gmail.com			
(m) Mobile No. (optional)		9540152870			
<b><u>DECLARATION</u></b> - I hereby declare that to the best of knowledge and belief – (i) I am a citizen of India and place of my birth is Village/Town <b>NEW ASHOK NAGAR</b> District <b>EAST</b> State <b>NCT OF Delhi</b> (ii) I am ordinarily resident at the address given at (h) above since <b>03/02/2004</b> . (iii) I have not applied for the inclusion of my name in the electoral roll for any other constituency.					

*\*(iv)My name has not already been included in the electoral roll for this or any other assembly / parliamentary constituency*

Applicant Place **NEW DELHI**

Applicant Date **12/02/2022**