







Under Section 3 of THE AADHAAR (TARGETED DELIVERY OF FINANCIAL AND OTHER SUBSIDIES, BENEFITS AND SERVICES) ACT, 2016 (Aadhaar Act)

AADHAAR ENROLMENT/ UPDATE FORM (ADULT –Residents 18 Years and above)				
Please follow the instructions overleaf while filling up the form. Use Capital letters only.				
1	New Enrolment		Update	
2	Resident Indian*		Non-Resident Indian (NRI**)	
3	In case of Update – Aadhaar Number (UID):			
_	Document update Language only Update			
4	Name (Name as per POI document):			
5	Approximate Declared Ve			
7	Address: C/o (Name-optional)			
	House No./ Bldg./Apt:		Street/Road/Lane:	
	Tomore Associated San Life Control Control	ard No:	Area/Locality/Sector:	
	Village/ Town/ City:		Post Office (Mandatory):	
	District:	Sub-District:	State:	
	E-Mail:	Mobile No.:	Pin Code (Mandatory):	
Verification Type: Document Based Head of Family (HoF) Based				
Select only one of the above. Select Head of Family only if you do not possess any documentary proof of address. Head of Family details are not required in case of				
8	For Document Based Enrolment (Write Names of the documents produced. Refer UIDAI website for list of documents)			
	702702		b. POA (Proof of Address)	
9	c. DOB (Date of Birth) (Mandatory in case of Verified Date of Birth)			
9				
	HoE's Andhaar No : State of the			
	a. POI b. POR (Proof of Relationship)			
	c. DOB (Mandatory in case of Verified Date of Birth):			
	and am in agreement to share my address voluntarily.			
	HoF's Name: Signature of HoF			
10	Demographic/ Document update (Write Names of the documents. Refer UIDAI website for list of documents)			
	a. POI (Proof of Identity)	ATTIC NAMES OF THE GOODING	b. POA (Proof of Address)	
	c. DOB (Date of Birth)		d. POR (Proof of Relation)	
1.		g of my identity informati		
	I hereby give my consent to sharing of my identity information and supporting documents with government agencies for the purpose of verification of information as a prerequisite for generation/updating of Aadhaar.			
	I understand that my identity information may be provided to an agency only with my consent during authentication or as per the			
	provisions of the Aadhaar Act and its Regulations. I have a right to access my identity information (except core biometrics) following			
	the procedure laid down by UIDAI.			
	the said information is found to be incorrect/fraudulent/false legal action may be initiated against me, as per the provisions of the Aadhaar A			
	2016 (18 of 2016) and, Regulations framed there under and other applicable Acts and Rules, etc.			
Verifier's Stamp and Signature:				
(Verifier must put his/ her Name, if stamp is not available) Applicant's signature/ Thumb impression				
To be filled by the Enrolment Agency only: Date & time of Enrolment:				
Note: In case of incapacitated person, the signature will be done by Legal Guardian of Incapacitated Person				
*Resident means resident as per Section 3(2) of the Aadhaar Act. **In case of NRI, only valid Indian Passport will be accepted as POI.				
In case of Resident Foreigner, separate form to be used.				

Keep your Aadhaar always updated for enhanced 'ease of living'. If your Aadhaar was issued more than 10 years back and has not since been updated, it is highly recommended that the supporting documents (POI/POA) are updated for continued accuracy of demographic information.

CERTIFICATE FOR AADHAAR ENROLMENT/ UPDATE (TO BE USED ONLY AS PROOF OF ADDRESS*) Instructions: All details to be filled in Block Letters (To be valid for 3 months from date of issue) To be printed on plain A4 paper size; Not required to be printed on letter head; Resident's Details Resident Non-Resident Indian (NRI) **New Enrolment Update Request Aadhaar Number:** (For update only) **Full Name:** C/o: House No./ Bldg./ Apt: Street/ Road/ Lane: Landmark: Area/ Locality/ Sector: Village/ Town/ City: Post Office: District: Resident's Recent Colour Photograph State: 3.5cm x 4.5 cm Cross Signed and **Cross Stamped** by the Certifier. PIN Code: NB: DO NOT **OVERLAP WITH TEXT BOXES** Signature of the Resident/ Date of Birth: Thumb/ Finger Impression Certifier's Details (To be filled by the certifier Only) Name of the Certifier: Designation: Office Address: **Contact Number: Checklist for Certifier** I hereby certify above mentioned details of the resident and I am a.... (Tick appropriate box below) ☐ Issue date is filled ☐ Resident's signature ☐ Certifier's details ■ No overwriting Resident's Photo is cross signed and cross stamped (paper to photo or photo to paper) Gazetted Officer - Group A Village Panchayat Head or Mukhiya Gazetted Officer - Group B MP/ MLA/ MLC/ Municipal Councillor Tehsildar Head of Recognized Educational Institution Superintendent/ Warden/ Matron/ Head of Institution of Recognized shelter homes/ Orphanages Signature & Stamp of the Certifier **EPFO Officer**

^{*}To be used as Proof of Identify (PoI) only in specific cases as mentioned in the list of applicable supporting documents.