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AADHAAR UPDATE FORM



भारतीय विशिष्ट पहचान प्राधिकरण भारत सरकार

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

Submission Date: 24-12-2023 Aadhaar Number: 330297099751 Application Type: Express

Fields to be updated in [Biometric(photo/fingerprint/Iris)]*

Aadhaar:

*Only fields mentioned here will be updated at ASK center.

Applicant Details

Resident Type: RESIDENT

Full Name: JAIDEO PRASAD

Date Of 06-01-1954

Birth/Age:

- Bring original documents for Enrolment/Update. No photocopy required.
- Original documents are scanned and given back to
 you

Appointment Details



Appointment Id: 1703431903245

Aadhaar Seva Kendra Address: 1st Floor Sai Tower New Dak Bunglow Road Patna Bihar

Appointment Date and Time:
Service Type:

O4-01-2024 (11:10)
Biometric Update (

Biometric(photo/fingerprint/Iris))

Payment Type: Online Payment Status: Success

Disclosure under section 3(2) of THE AADHAAR (TARGETED DELIVERY OF FINANCIAL AND OTHER SUBSIDIES, BENEFITS AND SERVICES) ACT, 2016

I confirm that I have been residing in India for at least 182 days in the preceding 12 months / I am Non Resident Indian (NRI) & information (including biometrics) provided by me to the UIDAI is my own and is true, correct and accurate. I am aware that my information including biometrics will be used for generation of Aadhaar and authentication. I understand that my identity information (except core biometric) may be provided to an agency only with my consent during authentication or as per the provisions of the Aadhaar Act. I have a right to access my identity information (except core biometrics) following the procedure laid down by UIDAI.

Verifier's Stamp and Signature

(Verifier must put her/his name if stamp is not avaliable.)

Applicant's Signature/Thumbprint

Note: In case of Child(< 5 Yrs) or Guardian based application, Guardian/Relative will be required to accompany the applicant. In case of incapacitated person, the signature will be done by Legal Guardian of Incapacitated Person.

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