To be printed on plain A4 paper size; Not required to print on letter head;			
		Resident's Details on-Resident Indian (NRI) New Enrolment Update Request	
Andhory Number			
Aadhaar Number: (For update only)	8.48614013427		
Full Name:	PRIYAVRAT NAG		
L			
C/o:	SHIBES HWAR SINGH MUNDA		
House No./ Bldg./ Apt:			
Street/ Road/ Lane:			
Landmark:			
Area/ Locality/ Sector:			
Village/ Town/ City:	BAUNTIA		
Post Office:	ULIDIH		
District:	RANCHI		
State:	JHAR KHAND		
	1 1		
PIN Code:	835225	Brigarrat Nog Brigarie y	
Date of Birth:	12 01	Signature of the Resident/ Thumb/ Finger Impression	
Certifier's Details (To be filled by the certifier Only)			
Name of the Certifier:	DHAUSINGH MUHDA		
Designation:	MUKHIYA		
Office Address:	SARJAMDIH, TAMAR		
	RANCHI, JHARKHAND		
Contact Number:	6200766494		
I hereby certify above mentioned details of the resident and I am a (Tick appropriate box below)		Checklist for Certifier No overwriting Sissue date is filled Resident's signature Certifier's details	
Gazetted Officer - Group A		Resident's Photo is cross signed and cross stamped (paper to photo or photo to paper)	
Village Panchayat Head or Mukhiya			
Gazetted Officer - Group B MP/ MLA/ MLC/ Muncipal Councilor		च्यानित मना	
Tehsildar		* Hoans 3/18/2024	
Head of Recognized Educational Institution		प्राम पंचारान	
Superintendent/ Warden/ Matron/ Head of Institution of Recognized shelter homes/ Orphanages		प्र0-तमाङ राँची झारखण्ड)	
		Signature & Stamp of the Certifier 11 Car	

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.

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

Instructions: All details to be filled in Block Letters