

form6

ELECTION COMMISSION OF INDIA

FORM-6

(See Rules 13(1) and 26)

Application form for New Voters

To, The Electoral Registration Officer,
Maharashtra Dhaisar
Assembly / Parliamentary Consitituency

Personal Details

First name followed by Middle Name	Najiya	नाजिया
Surname(if any)	Shaikh	शेख
Type of Relation	Father <input type="checkbox"/> Mother <input type="checkbox"/> Husband <input checked="" type="checkbox"/> Wife <input type="checkbox"/> Legal Guardian in case of orphan/Guru in case of Third Gender <input type="checkbox"/>	
Name and surname of of any one of the relatives	Mustafa Shaikh	मुस्तफा शेख
Mobile No. of Self (if available)	8692827694	Relative <input checked="" type="checkbox"/>
Email id of Self(If available)		Relative <input type="checkbox"/>
Aadhaar Number		
Gender	Male <input type="checkbox"/> Female <input checked="" type="checkbox"/> Third Gender <input type="checkbox"/>	
Date of Birth (in DD/MM/YYYY format)	25/01/1989	
Document for proof of Date of Birth	PAN Card	
Present Ordinary Residence	House/Building/Apartment No.	House-7/175 रुम नं.७/१७५
Street/Area/Locality/Mohalla/Road	Galli No 7 Ganpat Patil Nagar New Link Road	गल्ली नं.७ गणपत पाटील नगर न्यू लिंक रोड
Town/Village	IC Colony Borivali West	आय सी कॉलोनी बोरीवली वेस्ट
Post Office	Mandapeshwar मंडपेश्वर	Pin Code 400103
Tehsil/Taluqa/Mandal	Borivali	बोरीवली
District	Mumbai Suburban	State/UT Maharashtra
Proof of Residence	Aadhaar Card	

Category of disability if any(Optional)			
Disability (if any)	Locomotive <input type="checkbox"/> Visual <input type="checkbox"/> Deaf & dumb <input type="checkbox"/> Other _____	Percentage of disability	Certificate Attached <input type="checkbox"/>
Name of family member		Mustafa M Shaikh	
Relationship with applicant	Father <input type="checkbox"/> Mother <input type="checkbox"/> Husband <input checked="" type="checkbox"/> Wife <input type="checkbox"/> Legal Guardian in case of orphan/Guru in case of Third Gender <input type="checkbox"/>		
His/Her Epic No.		YBB9267162	
<p>DECLARATION - I HEREBY DECLARE that to the best of knowledge and belief –</p> <p>(i) I am a citizen of India and place of my birth is Village/Town Borivali West District Mumbai Suburban State Maharashtra</p> <p>(ii) I am ordinarily resident at the address mentioned at Sr. No. 8(a) in Form 6 since 21/01/2000 .</p> <p>(iii) I am applying for inclusion in Electoral Roll for the first time and my name is not included in any Assembly Constituency/Parliamentary Constituency.</p> <p>(iv) I don't possess any of the documents mentioned as proof of Date of Birth/Age. Therefore, I have enclosed in support of age proof.</p> <p>(v) I am aware that making the above statement or declaration in relation to this application which is false and which I know or believe to be false or do not believe to be true, is punishable under Section 31 of Representation of the People Act, 1950 (43 of 1950) with imprisonment for a term which may extend to one year or with fine or with both.</p>			

Applicant Place **Borivali West**

Applicant Date **21/02/2023**