2. Aadhaar Card	2 21112				
	3. PAN Ca	rd 4. D	iving License		
5.		6. In	dian Passport		
Certificates of Class X or Class XII issu Date of Birth	ued by CBSE/ICSE/ State Educati	onBoards, if it contain			
	note of Pirthy (If no document)	ovojlablo) (Pl. Spooify)			
(ii) Any Other Document for Proof of D		ачанаше) (М. Specity)			
8) (a.) Present Ordinary Residence (F	ull Address)				Coloot Language
House/Building/Apartment No. 1	I-9-157 1-9-157	Street/Area/Locality. RAJENDRA NAGA	AR రాజేంద్ర నగర్		Select Languaç
Tehsil/Taluqa/Mandal RAJENDRA	NAGAR రాజేంద్ర నగర్	Town/Village RAJENDRA NAGAR පැම්	ంద్ర నగర్		
Post Office RAJENDRA NAGAR တုံ	కేంద్ర నగర్	State/UT Telangana			
District Rangareddy		Pin Code 500030			
(b.) Self-attested copy of address proceedector at the same address (Attach and its indicated and its indicated	nyone of them)	or any one of parents/spouse/adult child, if	already enrolled as		
1. Water/Electricity/Gas connection	Bill for that address(atleast 1 ye	ar)			
2. Aadhaar Card	3.	4	. Indian Passport		
	Current passbook of Nationalized	I/Scheduled Bank/Post Office			
5.		6. Registered Rent Lease Deed(I	ncase of tenant)		
levenue Department's Land Owning re	cords including Kisan Bahi				
7.					
Registered Sale Deed(incase of own ho	ouse)				
(ii) Any Other Document for Proof of re	esidence:- (If no document is ava	nilable) (Pl. Specify)			
	,	· · · · · · · · · · · · · · · · · · ·			
(9)Category of disability, if any (Optior	nal) Locomotive	Visual Deaf &			
		Dumb			
	If any other (Give des	cription):-			\downarrow
Percentage of disability % Certifica	ite attached (Tick the appropriate	e box) Yes No			
		roll at current address with whom I currently			
Name of family member: MOHAMMEI GAFOOR AHMED DECLARATION	D Relationship with app			ı	
Name of family member: MOHAMMEI GAFOOR AHMED DECLARATION- I HEREBY DECLARE that to the best of	D Relationship with app	licant: Father His/her EPIC no. 1			
Name of family member: MOHAMMEI GAFOOR AHMED DECLARATION I HEREBY DECLARE that to the best of (i) I am a citizen of India and place of	D Relationship with app	licant: Father His/her EPIC no. 1			
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Name of family member: MOHAMMEI GAFOOR AHMED DECLARATION- I HEREBY DECLARE that to the best of (i) I am a citizen of India and place of District: Rangareddy (ii) I am ordinarily a resident at the ad (iii) I am applying for inclusion in Electory Parliamentary Constituency. (iv) I don't possess any of the document	Relationship with app f my knowledge and belief- my birth is:- Town/Village RAJI dress mentioned at Sr. No. 8(a) storal Roll for the first time and r	ENDRA NAGAR State/UT: Telangana in Form 6 since: 2002-05	NPK4599148		
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Name of family member: MOHAMMEI GAFOOR AHMED DECLARATION I HEREBY DECLARE that to the best of (i) I am a citizen of India and place of District: Rangareddy (ii) I am ordinarily a resident at the add (iii) I am applying for inclusion in Electory I am applying for inclusion in Electory I don't possess any of the docume off, if not applicable). (v) I am aware that making the above be false or do not believe to be true, is imprisonment for a term which may end DATE:09-10-2023 PLACE:RAJENDRA NAGAR Accessibility Instructions:- In the light Rules, 2017, in case of persons with i thumb impression of person with disasterials.	f my knowledge and belief- my birth is:- Town/Village RAJI dress mentioned at Sr. No. 8(a) storal Roll for the first time and r ents of age proof. Therefore, I ha statement or declaration in rela s punishable under Section 31 o extend to one year or with fine or	ENDRA NAGAR State/UT: Telangana in Form 6 since: 2002-05 ny name is not included in any Assembly Co ave enclosed: (Name of the document) in surtion to this application which is false and wh f Representation of the People Act, 1950 (43 with both.	nstituency/ pport of age proof (Strike ich I know or believe to 3 of 1950) with Persons with Disabilities nature or left hand		↑ Previous ↓
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https://voters.eci.gov.in/form6

D. Contact Details

<u> </u>		
2. Aadhaar Card 3. PAN C	ard 4. Driving License	•
5.	6. Indian Passport	
Certificates of Class X or Class XII issued by CBSE/ICSE/ State Educa Date of Birth	tionBoards, if it contain	
(ii) Any Other Document for Proof of Date of Birth:- (If no document is	available) (Pl. Specify)	
(8) (a.) Present Ordinary Residence (Full Address)		
House/Building/Apartment No. 1-9-157 1-9-157	Street/Area/Locality. RAJENDRA NAGAR రాజేంద్ర నగర్	1
Tehsil/Taluqa/Mandal RAJENDRA NAGAR రాజేంద్ర నగర్	Town/Village RAJENDRA NAGAR రాజేం ద్ర నగర్	
Post Office RAJENDRA NAGAR రాజేంద్ర నగర్	State/UT Telangana	
District Rangareddy	Pin Code 500030	
(b.) Self-attested copy of address proof either in the name of applica elector at the same address (Attach anyone of them)(i) Document for proof of residence ^:-	nt or any one of parents/spouse/adult child, if already enrolled as	
1. Water/Electricity/Gas connection Bill for that address(atleast 1 y	ear)	
2. Aadhaar Card 3. Current passbook of Nationalize	4. Indian Passport	↑ Previous ↓ Nex
		1 Previous V Nex
5.	6. Registered Rent Lease Deed(Incase of tenant)	
Revenue Department's Land Owning records including Kisan Bahi		
7.		
Registered Sale Deed(incase of own house)		
(ii) Any Other Document for Proof of residence:- (If no document is a	vailable) (PL Specify)	haar Number.
(ii) Any other bocament for 1 roof of residence. (if no document is a	anable) (1 i. Specify)	
(9)Category of disability, if any (Optional) Locomotive If any other (Give de	Visual Deaf & Dumb	
Percentage of disability % Certificate attached (Tick the appropria	te box) Yes No	↑ Previous ↓ Nex
(10)The details of my family member already included in the electora	I roll at current address with whom I currently reside are as under	1
Name of family member: MOHAMMED Relationship with ap GAFOOR AHMED	plicant: Father His/her EPIC no. WPK4599148	
DECLARATION		1
I HEREBY DECLARE that to the best of my knowledge and belief-		
(i) I am a citizen of India and place of my birth is:- Town/Village RA	JENDRA NAGAR	
District: Rangareddy	State/UT: Telangana	↑ Previous ↓ Nex
(ii) I am ordinarily a resident at the address mentioned at Sr. No. 8(a(iii) I am applying for inclusion in Electoral Roll for the first time and		
Parliamentary Constituency. (iv) I don't possess any of the documents of age proof. Therefore, I l	nave enclosed: (Name of the document) in support of age proof (Strike	
off, if not applicable). (v) I am aware that making the above statement or declaration in re	ation 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	· ·	
imprisonment for a term which may extend to one year or with fine of	r with both.	
DATE :09-10-2023		
PLACE :RAJENDRA NAGAR		
Accessibility Instructions:- In the light of provisions of Rights of Per Rules, 2017, in case of persons with intellectual disability, autism, c thumb impression of person with disability, or signature or left hand		1
Note-		4
	oferably be marking a	4
* In case of a married female applicant, name of Husband may pr ^ Submission of self-attested copy of document will ensure spee		-
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H. Present Address Details

8(a.) Present Ordinary Residence (Full Address)

House/Building/ Apartment No *

Street/Area/Locality/Mohalla/Road *

Village/Town *

↓ Next

			Form 6		
2. Aadhaar Card	3. PAN Ca	ard	4. Driving License	•	ENDRA NAGAR
5. Certificates of Class X or Class XII is:	sued by CBSE/ICSE/ State Educat	ionBoards, if it contain	6. Indian Passport		ుడ్ర నగర్
Date of Birth (ii) Any Other Document for Proof of	Data of Pirth: (If no document is	available) (Pl. Specify)			Taluqa/Mandal *
		available) (11. Specify)		_	:NDRA NAGAR
(8) (a.) Present Ordinary Residence ((Full Address)				
House/Building/Apartment No.		-	JENDRA NAGAR రాజేంద్ర నగర్		ుద్ర నగర్
Tehsil/Taluqa/Mandal RAJENDRA		Town/Village RAJENDRA	NAGAR రాజేంద్ర నగర్		
Post Office RAJENDRA NAGAR of District Rangareddy	ాజంద్ర నగం	State/UT Telangana Pin Code 500030			
(b.) Self-attested copy of address prelector at the same address (Attach (i) Document for proof of residence	anyone of them)		/adult child, if already enrolled as		lt child, if already enrolled as ele
	on Bill for that address(atleast 1 ye	ear)			
2. Aadhaar Card	3. Current passbook of Nationalize	d/Scheduled Bank/Post Office	4. Indian Passp	ort	
5.			t Lease Deed(Incase of tenant)		
devenue Department's Land Owning	records including Kisan Pahi	Negistered Relit	. 20000 Deca(modes of teriality		
	records including NISAN BAIN				
7. Societared Sala Dand/income of our	hausa)				
tegistered Sale Deed(incase of own					
(ii) Any Other Document for Proof of	residence:- (If no document is av	ailable) (Pl. Specify)			
(9)Category of disability, if any (Option	onal) Locomotive	Visual Dea		ш	↑ Previous ↓
	If any other (Give des	cription):-			
Percentage of disability % Certific	cate attached (Tick the appropriat	te box) Yes No		ш	
(10)The details of my family membe Name of family member: MOHAMM GAFOOR AHMED			om I currently reside are as under /her EPIC no. WPK4599148		oility
DECLARATION-					
I HEREBY DECLARE that to the best (i) I am a citizen of India and place of		ENDDA NACAD			
District: Rangareddy	of thy birth is Town/ Village RAJ	State/UT: Telangana			
(ii) I am ordinarily a resident at the a			Accomplise Compains and		
(iii) I am applying for inclusion in Ele Parliamentary Constituency.					
(iv) I don't possess any of the docur off, if not applicable).	ments of age proof. Therefore, I h	ave enclosed: (Name of the do	cument) in support of age proof (Strik	e	
			s false and which I know or believe to		
imprisonment for a term which may			7 Aug 1900 (40 of 1900) mai		
DATE :09-10-2023					
PLACE :RAJENDRA NAGAR					↑ Previous ↓
Accessibility Instructions:- In the lig			and Rights of Persons with Disabilitie illities etc., signature or left hand	s	
humb impression of person with di	sability, or signature or left hand	thumb impression of his/her le	gal guardian will be required.		hom I currently reside are as
Note-					
• •	olicant, name of Husband may pre	•			
^ Submission of self-attested co	py of document will ensure speed	y delivery of services.			er EPIC Number
	MOHAMMED GAFO	OOR AHMED	Father	~	/PK4599148
	WOTANINED GAT				
	WOTANINED GALC				
	WOTIANINED GALC				↑ Provious
	WOT ANIVIED GAT				↑ Previous ↓
	K. Declaration				↑ Previous ↓
	K. Declaration	the best of My knowledge and	d belief.		↑ Previous ↓

Village/Town * State/UT * District

https://voters.eci.gov.in/form6

10/9/23, 7:10

	Form 6
2. Aadhaar Card 3. PAN C	Card 4. Driving License
5.	6. Indian Passport
Certificates of Class X or Class XII issued by CBSE/ICSE/ State Educa Date of Birth	utionBoards, if it contain
(ii) Any Other Document for Proof of Date of Birth:- (If no document is	s available) (Pl. Specify)
(8) (a.) Present Ordinary Residence (Full Address)	
House/Building/Apartment No. 1-9-157 1-9-157	Street/Area/Locality. RAJENDRA NAGAR రాజేంద్ర నగర్
Tehsil/Taluqa/Mandal RAJENDRA NAGAR రాజేం ద్ర నగర్	Town/Village RAJENDRA NAGAR రాజేంద్ర నగర్
Post Office RAJENDRA NAGAR రాజేంద్ర నగర్	State/UT Telangana
District Rangareddy	Pin Code 500030
(b.) Self-attested copy of address proof either in the name of applical elector at the same address (Attach anyone of them) (i) Document for proof of residence ^:-	nt or any one of parents/spouse/adult child, if already enrolled as
1. Water/Electricity/Gas connection Bill for that address(atleast 1 y	year)
Aadhaar Card Current passbook of Nationalize	4. Indian Passport
5.	
	6. Registered Rent Lease Deed(Incase of tenant)
Revenue Department's Land Owning records including Kisan Bahi	
7. Registered Sale Deed(incase of own house)	
(ii) Any Other Document for Proof of residence:- (If no document is a	vailable) (Pl. Specify)
`,	
(9)Category of disability, if any (Optional) Locomotive	Visual Deaf & Dumb
If any other (Give de	scription):-
Percentage of disability % Certificate attached (Tick the appropria	ate box) Yes No
(10)The details of my family member already included in the electoral Name of family member: MOHAMMED Relationship with ap GAFOOR AHMED	·
DECLARATION	
I HEREBY DECLARE that to the best of my knowledge and belief-	
(i) I am a citizen of India and place of my birth is:- Town/Village RA	
District: Rangareddy (ii) I am ordinarily a resident at the address mentioned at Sr. No. 8(a	State/UT: Telangana a) in Form 6 since: 2002-05
(iii) I am applying for inclusion in Electoral Roll for the first time and	
Parliamentary Constituency. (iv) I don't possess any of the documents of age proof. Therefore, I h	have enclosed: (Name of the document) in support of age proof (Strike
off, if not applicable).	lation to this application which is folco and which I know as heliove to
be false or do not believe to be true, is punishable under Section 31	
imprisonment for a term which may extend to one year or with fine of	or with both.
DATE :09-10-2023 PLACE :RAJENDRA NAGAR	
FLACE .RAJENURA NAUAR	
Accessibility Instructions:- In the light of provisions of Rights of Per Rules, 2017, in case of persons with intellectual disability, autism, or thumb impression of person with disability, or signature or left hand	
Note-	
* In case of a married female applicant, name of Husband may pr	referably be mentioned.

Submission of self-attested copy of document will ensure speedy delivery of services.

below mentioned document in A_B A A A+ SYED FARHAN which I know or believe to be false with imprisonment for a term which imprison imprisonment for a term which imprison imprisonment for a term which imprison impris		cy/Parliamentary	
which I know or believe to be false with imprisonment for a term which			
with imprisonment for a term which	② SYE	FARHAN V	
		↑ Previous	↓ Ne
		↑ Previous	↓ Ne
		↑ Previous	↓ Ne
		↑ Previous	↓ Ne
		↑ Previous	↓ Ne

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