



## FORM-6

(See Rules 13(1) and (26) of the Registration of Electors Rules, 1960)

# ELECTION COMMISSION OF INDIA

## Application Form for New Voters

Acknowledgement  
No.51325006N04092512000043  
(To be filled by office)

To, The Electoral Registration Officer,  
Name of Assembly  
Constituency

No. 250  
Name: Akshat  
Or No. & Name of Parliamentary  
Constituency  
Name: -

(@Only for Union Territories not having Legislative Assembly)

I submit application for inclusion of my name in the electoral roll for the above constituency.

(1)(a.) Name (In Official Language of State)

First Name followed by Middle Name

Surname (if any) अक्षर

(1)(b.) Name (In English in BLOCK LETTERS)

First Name followed by Middle Name

Surname (if any) CHAVAN

Disclaimer: If name not filled in English, it will be transliterated by software.



\*(2)(a.) Name and Surname (in official language of State) of any one of the relatives:-

☐ Father  
Or ☒ Mother  
Or ☐ Husband  
Or ☐ Wife

Legal Guardian in case of orphan/Third Gender

(2)(b.) Name and Surname (In English in BLOCK LETTERS) of the relative mentioned above ANITA CHAVAN  
अनिता अक्षर

(3) Mobile No. of Self (if available)-

	8	9	7	2	0	5
	4	6	6	7		

Of relative mentioned at Item No. 2

-	-	-	-	-	-
-	-	-	-	-	

(4) Email ID of Self (if available)

Or kingmaker.a2007@gmail.com

Of relative mentioned at Item No. 2

(5) Aadhaar Details

2	6	2	5	0	5
3	2	7	1	6	1

(6) Gender

☒ MALE  
☐ FEMALE  
☐ THIRD GENDER

(7)(a.) Date of Birth (dd/mm/yyyy)

2	4	0	7	0	8
---	---	---	---	---	---

(b.) Self attested copy of document supporting age proof attached (anyone of the following)

(i) Document for Proof of Date of Birth ^:-  
(Any one of these)

- ☐ Birth certificate issued by Competent Local Authority/Registrar of Births & Deaths
- ☒ Aadhaar Card
- ☐ PAN Card
- ☐ Driving License
- ☐ Certificates of Class X or Class XII issued by CBSE/ICSE/State Education Boards, if it contain Date of Birth
- ☐ Indian Passport

(ii) Any Other Document for Proof of Date of Birth:- (if no document is available) (Pl. Specify)

<b>(8) (a.) Present Ordinary Residence (Full Address)</b>																						
House/Building/Apartment No. <b>36</b> Rakesh nivas 36 राकेश निवास Street/Area/Locality. <b>mulgaon tand</b> Swami Vivekananda Nagar गुर्मा तंड नगर Tehsil/Taluqa/Mandal <b>South Solapur</b> तहसिल दक्षिण सोलापूर Town/Village <b>mulgaon tand गुर्मा तंड</b> Post Office <b>mulgaon गुर्मा</b> State/UT <b>Maharashtra</b> District <b>Solapur</b> Pin Code <b>413006</b>																						
<b>(b.) Self-attested copy of address proof either in the name of applicant or any one of parent/spouse/adult child, if already enrolled as elector at the same address (Attach anyone of them)</b> <b>(i) Document for proof of residence ^:-</b> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">1.</td> <td style="width: 15%; border: 1px solid black; text-align: center;"><input type="checkbox"/></td> <td style="padding-left: 10px;">Water/Electricity/Gas connection Bill for that address(atleast 1 year)</td> </tr> <tr> <td style="text-align: center;">2.</td> <td style="border: 1px solid black; text-align: center;"><input checked="" type="checkbox"/></td> <td style="padding-left: 10px;">Aadhaar Card</td> </tr> <tr> <td style="text-align: center;">3.</td> <td style="border: 1px solid black; text-align: center;"><input type="checkbox"/></td> <td style="padding-left: 10px;">Current passbook of Nationalized/Scheduled Bank/Post Office</td> </tr> <tr> <td style="text-align: center;">4.</td> <td style="border: 1px solid black; text-align: center;"><input type="checkbox"/></td> <td style="padding-left: 10px;">Indian Passport</td> </tr> <tr> <td style="text-align: center;">5.</td> <td style="border: 1px solid black; text-align: center;"><input type="checkbox"/></td> <td style="padding-left: 10px;">Revenue Department's Land Owning records including Kisan Bahi</td> </tr> <tr> <td style="text-align: center;">6.</td> <td style="border: 1px solid black; text-align: center;"><input type="checkbox"/></td> <td style="padding-left: 10px;">Registered Rent Lease Deed(Incase of tenant)</td> </tr> <tr> <td style="text-align: center;">7.</td> <td style="border: 1px solid black; text-align: center;"><input type="checkbox"/></td> <td style="padding-left: 10px;">Registered Sale Deed(Incase of owner house)</td> </tr> </table> <b>(ii) Any Other Document for Proof of residence:- (If no document is available) (Pl. Specify) _____</b>		1.	<input type="checkbox"/>	Water/Electricity/Gas connection Bill for that address(atleast 1 year)	2.	<input checked="" type="checkbox"/>	Aadhaar Card	3.	<input type="checkbox"/>	Current passbook of Nationalized/Scheduled Bank/Post Office	4.	<input type="checkbox"/>	Indian Passport	5.	<input type="checkbox"/>	Revenue Department's Land Owning records including Kisan Bahi	6.	<input type="checkbox"/>	Registered Rent Lease Deed(Incase of tenant)	7.	<input type="checkbox"/>	Registered Sale Deed(Incase of owner house)
1.	<input type="checkbox"/>	Water/Electricity/Gas connection Bill for that address(atleast 1 year)																				
2.	<input checked="" type="checkbox"/>	Aadhaar Card																				
3.	<input type="checkbox"/>	Current passbook of Nationalized/Scheduled Bank/Post Office																				
4.	<input type="checkbox"/>	Indian Passport																				
5.	<input type="checkbox"/>	Revenue Department's Land Owning records including Kisan Bahi																				
6.	<input type="checkbox"/>	Registered Rent Lease Deed(Incase of tenant)																				
7.	<input type="checkbox"/>	Registered Sale Deed(Incase of owner house)																				
<b>(9)Category of disability, if any (Optional)</b> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; border: 1px solid black; text-align: center;"><input type="checkbox"/></td> <td style="padding-left: 10px;">Locomotive</td> </tr> <tr> <td style="border: 1px solid black; text-align: center;"><input type="checkbox"/></td> <td style="padding-left: 10px;">Visual</td> </tr> <tr> <td style="border: 1px solid black; text-align: center;"><input type="checkbox"/></td> <td style="padding-left: 10px;">Deaf &amp; Dumb</td> </tr> </table> <b>If any other (Give description):-</b> _____ <b>Percentage of disability</b> _____ <b>Certificate attached (tick the appropriate box)</b> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; border: 1px solid black; text-align: center;"><input type="checkbox"/></td> <td style="padding-left: 10px;">Yes</td> </tr> <tr> <td style="border: 1px solid black; text-align: center;"><input type="checkbox"/></td> <td style="padding-left: 10px;">No</td> </tr> </table>		<input type="checkbox"/>	Locomotive	<input type="checkbox"/>	Visual	<input type="checkbox"/>	Deaf & Dumb	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No											
<input type="checkbox"/>	Locomotive																					
<input type="checkbox"/>	Visual																					
<input type="checkbox"/>	Deaf & Dumb																					
<input type="checkbox"/>	Yes																					
<input type="checkbox"/>	No																					
<b>(10)The details of my family member already included in the electoral roll at current address with whom I currently reside are as under</b> <b>Name of family member:</b> <b>Relationship with applicant:</b> <b>His/her EPIC no.</b>																						
<b>DECLARATION:-</b> <b>I HEREBY DECLARE that to the best of my knowledge and belief-</b> <b>(i) I am a citizen of India and place of my birth is:- Town/Village mulgaon tand District: Solapur State/UT: Maharashtra</b> <b>(ii) I am ordinarily a resident at the address mentioned at Sr. No. 8(a) in Form 6 since: 2007-07</b> <b>(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.</b> <b>(iv) I don't possess any of the documents of age proof. Therefore, I have enclosed: (Name of the document) in support of age proof (tick off, if not applicable).</b> <b>(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.</b> <b>DATE :04-09-2025</b> <b>PLACE :SOLAPUR</b>																						
<b>Accessibility Instructions:- In the light of Provisions of Rights of Persons with Disabilities Act 2016 and Rights of Persons with Disabilities Rules, 2017, in case of persons with intellectual disability, cerebral palsy and multiple disabilities etc., signature or left hand thumb impression of person with disability, or signature or left hand thumb impression of his/her legal guardian will be required.</b>																						
<b>Note:-</b>																						
*	In case of a married female applicant name of husband may preferably be mentioned																					
^	Submission of self-attested copy of document will ensure speedy delivery of services.																					
#	In case none of the documents is available, field verification is must. As for example, category like homeless Indian citizens who are otherwise eligible to become electors but do not possess any documentary proof of ordinary residence, Electoral Registration Officer shall designate an officer for field verification.																					
<b>Acknowledgement/Receipt</b> <b>Acknowledgement Number</b> <b>S13250006N0409251200043</b> <div style="text-align: right;"><b>DATE 04-09-2025</b></div> <b>Received the application in Form 6 of</b> <b>Shri/Smt./Ms. Tushar Chavan</b> <b>गुर्मा तंड</b> <b>[Applicant can refer the Acknowledgement No. to check the status of application]</b>																						