

OFFICE OF THE  
CHIEF ELECTORAL OFFICER, MANIPUR

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**NOTICE INVITING TENDER**

Imphal, the 7<sup>th</sup> July 2022

**No. e-Roll-102/1/2022-ELEC-ED:** - Sealed tenders (as per Annexure "A") are invited from reputed firms for the printing of various FORMS as specified in Annexure "B".

2. Interested firms may submit sealed tender till 3.00 PM on 20<sup>th</sup> July 2022 addressed to the undersigned. Sealed tenders (Technical Bid) will be opened at 11 am on 21<sup>st</sup> July 2022 (Thursday) in the Office chamber of Additional Chief Electoral Officer, Manipur, Lamphel, Imphal-795004. Financial Bid will be opened at 3 PM on 22<sup>nd</sup> July 2022 (Friday) in the Office Chamber of Principal Secretary (Election), Government of Manipur. Necessary terms and conditions are enclosed herewith. The tenders not fulfilling any of the enclosed terms and conditions will be summarily rejected. The rate quoted should be inclusive of all taxes and delivery charges.

3. Details can be downloaded from the CEO's Manipur website [www.ceomanipur.nic.in](http://www.ceomanipur.nic.in).

(Ramananda Nongmeikapam)  
Joint Chief Electoral Officer, Manipur.

Memo No.e-Roll-102/1/2022-ELEC-ED  
Copy to:-

Imphal, the 7<sup>th</sup> July 2022

1. Principal Secretary (Election), Govt.of Manipur.
2. The Database Administrator for uploading at the CEO's website.
3. The Editor, Sangai Express (English)/Poknapham Daily (Manipuri)/Sanaleipak (Manipuri) for publication as paid advertisement for 1 (one) day.
4. Relevant file/Guard file.

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### Terms and Conditions

1. The firm shall submit **Income Tax return for last 2(two) years and GST registration Number.**
2. The **Tender Fees of Rs.3000/-**, non-refundable in the form of **Bank draft** of any Nationalized Bank/ Scheduled Commercial Bank payable at Imphal drawn in favour of Joint Chief Electoral Officer, Manipur.
3. Security deposit will be 10% of the contract value and is to be submitted by the successful tenderer within 3 days.
4. An **Earnest Money Deposit of Rs. 2,00,000/- [Rupees two lakh only]**, refundable in the form of Bank draft of any Nationalized Bank/ Scheduled Commercial Bank payable at Imphal drawn in favour of Joint Chief Electoral Officer, Manipur. In case of firms registered with DGS&D or with the Manipur Govt.(Industries Dept) or MSME registered firms are specifically entitled to be exempted from payment of EMD.
5. The successful firm after allotment of job, if it is found that the job is not being done as per the required specifications and if the terms and conditions are not met with, the Chief Electoral Officer has the right to cancel the job assigned and impose a penalty on the firm.
6. This office will not pay any advance to the firm. **The firm will have to carry out the entire job of printing, set-making, delivery etc. on its own and payment will be made only after satisfactory completion of job and submission of bill in this regard.**
7. This office may cancel the order if the required items are not supplied in time or do not meet the specification envisaged by this office.
8. This office reserves the right to accept or reject any or all tenders without assigning any reason thereof. This office can also modify the terms and conditions before giving the job order.
9. The successful firm/empanelment would be valid for the period of FY 2022-2023 The term of engagement may be extended to the next Financial Year(s) based on the quality of work executed and mutual agreement.
10. A representative from the bidding firm can take part in the sealed tender (Technical Bid only) opening meeting.
11. Sample of the **paper (A4 Size; 75 GSM for BW & A4 Size; 90 GSM for Colour print)** and **a sample of all types (BW/Colour) of printed forms** should be submitted positively.

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ANNEXURE A

FINANCIAL BID

1. Name & Address of the bidder/firm:.....
2. Contact Details of the bidder/firm:
  - a. Mobile No.....
  - b. Email Id.....
  - c. Websites:.....
  - d. PAN .....
  - e. GST Regd.No.....
3. Total Price for the mentioned Job: Rs.....  
(Inclusive of all taxes) (in words).....

Authorized Signature & Seal of the bidder/firm.







**"Form- 1**

(See rule 7)

**The Registration of Electors Rules, 1960**

**Statement as to place of Ordinary Residence by a Person holding a Declared Office**

SPACE FOR PASTING ONE RECENT  
UNSIGNED PASSPORT SIZE COLOR  
PHOTOGRAPH (4.5 CM X 3.5 CM)  
SHOWING FRONTAL VIEW OF FULL FACE  
WITH WHITE BACKGROUND

**Personal Details**

Full Name

Relation Name

Relation Type  Father  Mother  Husband  Wife  Others

Age  Years  Month Date of Birth  d d / m m / y y y y

Gender  Male  Female

Office held \_\_\_\_\_

EPIC No. (If issued) \_\_\_\_\_

Aadhaar Details:- (Please tick the appropriate box)

- (a)  Aadhaar Number  or  
(b)  I am not able to furnish my Aadhaar Number because I don't have Aadhaar Number

Mobile No. (optional)

Email Id (optional) \_\_\_\_\_

I hereby declare that I am a citizen of India and that but for my holding the above-mentioned office, I would have been ordinarily resident at:-

House/Building/Apartment No.	Street/Mohalla
Locality	Town/Village
Post Office	Police Station
Tehsil/Taluqa/Mandal	PIN Code
District	State/UT

Assembly Constituency \_\_\_\_\_

I further declare that my spouse (Husband/Wife) Shri./Smt. \_\_\_\_\_

Age  Years  Months Date of Birth  d d / m m / y y y y

ordinarily resides with me and is a citizen of India.

I, further, declare that I \*and my spouse have neither got \*ourselves/myself already registered nor have applied for such registration as ordinary electors in the electoral roll of the place where I am presently posted and residing or any other constituency.

I also declare that I am aware of the law that prohibits getting registered as an elector at more than one place either in the same constituency or in different constituencies and if my name \*or my spouse's name so appears at different places, the same may be deleted from all such places except from the electoral roll of my native place for which I have made the statement.

Date: \_\_\_\_\_

(Signature)

**(For use in the Election Office)**

Statement received on the \_\_\_\_\_ 20 \_\_\_\_\_  
Registered in the electoral roll for the \_\_\_\_\_ Assembly Constituency  
No. \_\_\_\_\_ Part No. \_\_\_\_\_ at S. No. \_\_\_\_\_

Date: \_\_\_\_\_ Electoral Registration Officer \_\_\_\_\_

\* Strike off if not applicable

**Form- 2**

(See rule 7)

**The Registration of Electors Rules, 1960**

**Statement as to place of Ordinary Residence by member of the Armed Forces**

SPACE FOR PASTING ONE RECENT  
UNSIGNED PASSPORT SIZE COLOR  
PHOTOGRAPH (4.5 CM X 3.5 CM)  
SHOWING FRONTAL VIEW OF FULL FACE  
WITH WHITE BACKGROUND

**Personal Details**

Full Name \_\_\_\_\_

Relation Name \_\_\_\_\_

Relation Type  Father  Mother  Husband  Wife  Other

Age  Years  Month Date of Birth  d  d /  m  m /  y  y  y  y

Gender  Male  Female

EPIC No. (If issued) \_\_\_\_\_

Aadhaar Details:- (Please tick the appropriate box)

(a)  Aadhaar Number \_\_\_\_\_ or

(b)  I am not able to furnish my Aadhaar Number because I don't have Aadhaar Number

Mobile No. (optional) \_\_\_\_\_

Email Id (optional) \_\_\_\_\_

I hereby declare that I am a citizen of India and that but for my service in Armed Forces I would have been ordinarily resident at:-

House/Building/Apartment No.	Street/ Mohalla
Locality	Town/Village
Post Office	Police Station
Tehsil/Taluqa/Mandal	PIN Code
District	State/UT

Assembly Constituency \_\_\_\_\_

**Service Details**

Service/Buckle No. \_\_\_\_\_

Rank \_\_\_\_\_

Name of Armed Force \_\_\_\_\_

Service/Corps/Regiment \_\_\_\_\_

Name and Address of Record Office \_\_\_\_\_

I further declare that my spouse (Husband/Wife) Shri./Smt. \_\_\_\_\_

Age  Years  Months Date of Birth  d  d /  m  m /  y  y  y  y

ordinarily resides with me and is a citizen of India.

I, further, declare that I \*and my spouse have neither got \*ourselves/myself already registered nor have applied for such registration as ordinary electors in the general part of the electoral roll of the place where I am presently posted and residing or any other constituency.

I also declare that I am aware of the law that prohibits getting registered as an elector at more than one place either in the same constituency or in different constituencies and if my name \*or my spouse's name so appears at different places, the same may be deleted from all such places except from the last part of the electoral roll of my native place for which I have made the statement.

Date: \_\_\_\_\_

(Signature)

**Record Office/Commandant's Office**

Folio No. \_\_\_\_\_

Place \_\_\_\_\_

Date \_\_\_\_\_

**Verified and found Correct**

(Signature) \_\_\_\_\_

(Designation) \_\_\_\_\_

Officer-in-Charge, Records.

**(For use in the Election Office)**

Statement received on the \_\_\_\_\_ 20 \_\_\_\_\_

Registered in the electoral roll for the \_\_\_\_\_ Assembly Constituency

No. \_\_\_\_\_ Service Voter's Part, at S.No. \_\_\_\_\_

Date: \_\_\_\_\_ Electoral Registration Officer \_\_\_\_\_

\* Strike off if not applicable

**Form- 2A**

(See rule 7)

**The Registration of Electors Rules, 1960**

**Statement as to place of Ordinary Residence by a member of the Armed police force of a State, who is serving outside that State**

SPACE FOR PASTING ONE RECENT UNSIGNED PASSPORT SIZE COLOR PHOTOGRAPH (4.5 CM X 3.5 CM) SHOWING FRONTAL VIEW OF FULL FACE WITH WHITE BACKGROUND

**Personal Details**

Full Name \_\_\_\_\_

Relation Name \_\_\_\_\_

Relation Type  Father  Mother  Husband  Wife  Others

Age  Years  Month Date of Birth  d  d /  m  m /  y  y  y  y

Gender  Male  Female

EPIC No. (If issued) \_\_\_\_\_

**Aadhaar Details:- (Please tick the appropriate box)**

(a)  Aadhaar Number  \_\_\_\_\_ or

(b)  I am not able to furnish my Aadhaar Number because I don't have Aadhaar Number

Mobile No. (optional)  \_\_\_\_\_

Email Id (optional) \_\_\_\_\_

I hereby declare that I am a citizen of India and that but for my service outside the state in armed police forces mentioned below, I would have been ordinarily resident at:-

House/Building/Apartment No.	Street/ Mohalla
Locality	Town/Village
Post Office	Police Station
Tehsil/Taluqa	Pin Code
District	State/UT

Assembly Constituency \_\_\_\_\_

**Service Details**

Service /Buckle No. \_\_\_\_\_

Rank \_\_\_\_\_

Name of Armed police Force \_\_\_\_\_

Name and Address of office of the Commandant \_\_\_\_\_

I further declare that my spouse (Husband/Wife) Shri./Smt. \_\_\_\_\_

Age  Years  Months Date of Birth  d  d /  m  m /  y  y  y  y

ordinarily resides with me and is a citizen of India.

I, further, declare that I \*and my spouse have neither got \*ourselves/myself already registered nor have applied for such registration as ordinary electors in the general part of electoral roll of the place where I am presently posted and residing or any other constituency.

I also declare that I am aware of the law that prohibits getting registered as an elector at more than one place either in the same constituency or in different constituencies and if my name \*or my spouse's name so appears at different places, the same may be deleted from all such places except from the last part of the electoral roll of my native place for which I have made the statement.

Date: \_\_\_\_\_ (Signature) \_\_\_\_\_

<b>Commandant's Office</b>	<b>Verified and found Correct</b>
Folio No. _____	(Signature) _____
Place _____	(Designation) _____
Date _____	Commandant _____

**(For use in the Election Office)**

Statement received on the \_\_\_\_\_ 20 \_\_\_\_\_

Registered in the electoral roll for the \_\_\_\_\_ Assembly Constituency

No. \_\_\_\_\_ Service Voter's Part, at S.No. \_\_\_\_\_

Date: \_\_\_\_\_ Electoral Registration Officer \_\_\_\_\_

\* Strike off if not applicable

**Form-3**

(See rule 7)

**The Registration of Electors Rules, 1960****Statement as to place of Ordinary Residence by a Person employed under the Government of India in a post outside India**SPACE FOR PASTING ONE RECENT  
UNSIGNED PASSPORT SIZE COLOR  
PHOTOGRAPH (4.5 CM X 3.5 CM)  
SHOWING FRONTAL VIEW OF FULL  
FACE WITH WHITE BACKGROUND**Personal Details**

Full Name

Relation Name

Relation Type  Father  Mother  Husband  Wife  OtherAge  Years  Month Date of Birth d d / m m / y y y yGender  Male  Female

EPIC No. (If issued)

Aadhaar Details:- (Please tick the appropriate box)

(a)  Aadhaar Number(b)  I am not able to furnish my Aadhaar Number because I don't have Aadhaar Number

Mobile No. (optional)

Email Id (optional)

I hereby declare that I am a citizen of India and that but for my being employed under Government of India in the below-mentioned post, I would have been ordinarily resident at (full postal address):-

House/Building/Apartment No.	Street/Mohalla
Locality	Town/Village
Post Office	Police Station
Tehsil/Taluqa/Mandal	PIN Code
District	State/UT

Assembly Constituency

**Service Details**

Unique Id No.

Description of post held outside India

Address of Head of Office

I further declare that my spouse (Husband/Wife) Shri./Smt.

Age  Years  Months Date of Birth d d / m m / y y y y

ordinarily resides with me and is a citizen of India.

I, further, declare that I \*and my spouse have neither got \*ourselves/myself already registered nor have applied for such registration as ordinary electors in the general part of electoral roll of the place where I am presently posted and residing or any other constituency.

I also declare that I am aware of the law that prohibits getting registered as an elector at more than one place either in the same constituency or in different constituencies and if my name \*or my spouse's name so appears at different places, the same may be deleted from all such places except from the last part of the electoral roll of my native place for which I have made the statement.

Date:

(Signature)

**Verified and found Correct**

(Signature)

(Designation of the Head of Office)

**(For use in the Election Office)**

Statement received on the \_\_\_\_\_ 20 \_\_\_\_\_

Registered in the electoral roll for the \_\_\_\_\_ Constituency

No. \_\_\_\_\_ Service Voter's Part, at S.No. \_\_\_\_\_

Date: \_\_\_\_\_ Electoral Registration Officer \_\_\_\_\_

\* Strike off if not applicable

10. For Form 6 to the said rules, the following Form shall be substituted, namely:—

	<p><b>"Form-6"</b>                  [See rules 13(1) and 26]  <b>ELECTION COMMISSION OF INDIA</b>  <b>Application Form for New Voters</b></p>	FORM No. _____ 'To be filled by office)
To, The Electoral Registration Officer, No. & Name of Assembly Constituency                      No. <input type="text"/> Name _____ Or No. & Name of Parliamentary Constituency@                      No. <input type="text"/> 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 <input type="text"/> Surname (if any) <input type="text"/>		
SPACE FOR PASTING ONE RECENT UNSIGNED PASSPORT SIZE COLOR PHOTOGRAPH (4.5 CM X 3.5 CM) SHOWING FRONTAL VIEW OF FULL FACE WITH WHITE BACKGROUND		
(1)(b) Name (In English in BLOCK LETTERS) First Name followed by Middle Name <input type="text"/> Surname (if any) <input type="text"/> <i>Disclaimer: If name not filled in English, it will be transliterated by software.</i>		
*(2)(a) Name and Surname (in official language of State) of any one of the relatives:- <input type="checkbox"/> Father    Or <input type="checkbox"/> Mother    Or <input type="checkbox"/> Husband    Or <input type="checkbox"/> Wife    Or <input type="checkbox"/> Legal Guardian in case of orphan/Guru in case of Third Gender <input type="text"/>		
*(2)(b) Name and Surname (In English in BLOCK LETTERS) of the relative mentioned above <input type="text"/>		
(3) Mobile No. of Self (if available)                      (or) <input type="text"/> Of relative mentioned at Item No. 2		
(4) Email ID of Self (If available)                      (or)                      _____ Of relative mentioned at Item No. 2		
(5) Aadhaar Details:- (Please tick the appropriate box) (a) <input type="checkbox"/> Aadhaar Number <input type="text"/> or (b) <input type="checkbox"/> I am not able to furnish my Aadhaar Number because I don't have Aadhaar Number.		
(6) Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Third Gender		
(7) (a) Date of Birth <input type="text"/>		
(b) Self attested copy of document supporting age proof attached (anyone of the following) (i) <u>Document for Proof of Date of Birth</u> ^:- (Any one of these) 1. <input type="checkbox"/> Birth certificate issued by Competent Local Body/Municipal Authority/Registrar of Births & Deaths 2. <input type="checkbox"/> Aadhaar Card                      3. <input type="checkbox"/> PAN Card                      4. <input type="checkbox"/> Driving License 5. <input type="checkbox"/> Certificates of Class X or Class XII issued by CBSE/ICSE/ State                      6. <input type="checkbox"/> Indian Passport Education Boards, if it contains Date of Birth (ii) <u>Any Other Document for Proof of Date of Birth</u> :- (If none of the above documents is available) (Pl. Specify) _____		
(8) (a) Present Ordinary Residence (Full Address)	House/Building/Apartment No.	Street/Area/Locality/ Mohalla/Road
	Town/Village	Post Office
	PIN Code	Tehsil/Taluqa/Mandal
	District	State/UT

(b) Self-attested copy of address proof either in the name of applicant or any one of parents/spouse/adult child, if already enrolled as elector at the same address (Attach anyone of them)

(i) Document for proof of residence ^:- (Any one of these)

- |                             |   |                             |   |
|-----------------------------|---|-----------------------------|---|
| 1. <input type="checkbox"/> | Water/Electricity/Gas connection Bill for that address (atleast 1 year) | 2. <input 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 (In case of tenant)                          | 7. <input type="checkbox"/> | Registered Sale Deed (In case of own house) |

(ii) Any Other document for Proof of residence: -

(If none of the above documents is available) (Pl. Specify) # \_\_\_\_\_

(9) Category of disability, if any(Optional)  Locomotive  Visual  Deaf & Dumb  
If any other (Give description) \_\_\_\_\_

Percentage of disability:  %, Certificate attached (Tick the appropriate box)  Yes  No

(10) The details of my family member already included in the electoral roll at current address with whom I currently reside are as under:

Name of family member: \_\_\_\_\_ Relationship with applicant: \_\_\_\_\_

His/her EPIC no.: \_\_\_\_\_

#### 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:- Village/Town \_\_\_\_\_

District \_\_\_\_\_ State/UT \_\_\_\_\_

(ii) I am ordinarily a resident at the address mentioned at Sr. No. 8(a) in Form 6 since \_\_\_\_\_ (mention month and year)

(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.

(iv) I don't possess any of the documents mentioned at (7)(b)(i) above for proof of Date of Birth/Age. Therefore, I have 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 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.

Date: \_\_\_\_\_

Place: \_\_\_\_\_ Signature of Applicant/Left Hand Thumb Impression

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, autism, 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.

#### Note-

\* In case of a married female applicant, name of Husband may preferably be mentioned.

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

# In case none of the mentioned 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.

✂ **Acknowledgement/Receipt for application** ✂

Acknowledgment Number \_\_\_\_\_ Date \_\_\_\_\_

Received the application in Form 6 of Shri/Smt./Ms. \_\_\_\_\_

[Applicant can refer the Acknowledgement No. to check the status of application.]

Name/Signature of ERO/AERO/BLO

**GUIDELINES FOR FILLING UP THE APPLICATION****FORM-6****1. General Instructions:-**

(a) The application will be addressed to the Electoral Registration Officer (ERO) of the Assembly Constituency (AC)/Parliamentary Constituency (PC) in which the applicant is ordinarily residing. In case the applicant does not know or has any doubt about number and name of Assembly Constituency / Parliamentary Constituency, assistance may be extended by the Electoral Registration Officer and the application will not be rejected on the ground of not mentioning of number and name of Assembly Constituency / Parliamentary Constituency.

(b) The applicant can fill entries of the application either in English or official language of the state and this will not be a ground for rejection of application.

(c) A service personnel, applying for enrolment as general elector in the electoral roll at his place of posting at a peace station, should ensure that he is not already enrolled as service elector or general elector in some other constituency.

\*(d) Photograph: A recent good quality passport size unsigned colour photograph (4.5cm X 3.5cm) with white background should be pasted in the space provided. Eyes must be open and both edges of face must be clearly visible.

(e) Elector's Photo Identity Card (EPIC): EPIC will be delivered at given postal address after enrolment, free of cost through speed post under proper acknowledgement.

2. **Item (1) \*(Name):** The exact name and spelling should be furnished in both official language of the State and English. If filled in only one language, system will transliterate automatically in other language which may lead to spelling mistakes.

3. **Item (2a) & (2b) (Name and Surname of Relative):** In case of a married female applicant, name of husband may preferably be mentioned. (Strike off the inapplicable options in the column).

4. **Item (5) Aadhaar Details:** Aadhaar Number should be furnished for the purpose of authentication of entries. If the applicant does not have Aadhaar number, the same may be mentioned in box at item 5 (b).

**5. Item (6) (Gender):**

\*(a) Gender in the appropriate box provided for 'Male' / 'Female' / 'Third Gender' should clearly be tick marked.

(b) Applicants belonging to Third Gender may indicate their sex as 'Male' or as 'Female' or as 'Third Gender'.

**6. Item 7(a)(b) (Date of Birth):**

\*(a) A self-attested copy of one of the documents mentioned in the form can be attached as age proof. Submission of a document mentioned in the form will ensure speedy registration and delivery of services.

(b) If none of the documents mentioned in the form is available, the applicant should enclose some other document in support of age proof; and name of the said document should be mentioned in item 7(ii) and item (iv) of 'DECLARATION' part in Form. In such case, the applicant will have to appear personally before Electoral Registration Officer or any other officer designated by him for verification.

**7. Item 8 (Present Ordinary Residence):**

\*(a) Complete postal address with PIN code should be mentioned along with a self-attested copy of any of the mentioned documents in name of applicant/parents/spouse as proof of ordinary residence.

(b) Necessary field verification shall be made in cases of Homeless Indian Citizens living in sheds/pavements and sex workers having no documentary proof of ordinary residence, provided they are otherwise eligible for enrollment.

(c) Students, who are eligible for enrollment, can be enrolled either at their parent's place or at the hostel/mess where they are ordinarily residing.

8. **\*DECLARATION:** All entries in "DECLARATION" portion should be completed in all respects. **Please note that giving any false statement made in the DECLARATION portion is a punishable offence under section 31 of the Representation of the People Act, 1950 (43 of 1950) with imprisonment with a term which may extend to one year or with fine or with both. ?**



12. For Forms 7 and 8 to the said rules, the following Forms shall, respectively, be substituted, namely:—

 <p style="text-align: center;"><b>“Form-7</b> [See rules 13(2) and 26]</p> <p style="text-align: center;"><b>ELECTION COMMISSION OF INDIA</b></p> <p style="text-align: center;"><b>Voter Application Form for Objection for Proposed Inclusion/ Deletion of Name in Existing Electoral Roll</b></p>	<p>FORM No. _____ (To be filled by office)</p>																				
<p>To, The Electoral Registration Officer, No. &amp; Name of Assembly Constituency      No. <input type="text"/>      Name _____</p> <p>Or No. &amp; Name of Parliamentary Constituency@      No. <input type="text"/>      Name _____ (@ only for Union Territories not having Legislative Assembly)</p> <p>I submit application for objection for proposed inclusion/deletion of name in existing electoral roll.</p>																					
<p>(1) Name of the applicant <input type="text"/></p> <p>EPIC No. _____</p> <p>Mobile No. of Self <input type="text"/> or</p> <p>Mobile No. of Relative <input type="text"/></p>																					
<p>(2) Option of application/objection:- (Tick the appropriate option) (Any one)</p> <p><input type="checkbox"/> (i) I request to delete name of the person mentioned below already included in the current roll due to any one of the following reasons:- (tick any one)</p> <p style="margin-left: 40px;"> <input type="checkbox"/> Death                      <input type="checkbox"/> Under Age                      <input type="checkbox"/> Absent / Permanently shifted  <input type="checkbox"/> Already enrolled              <input type="checkbox"/> Not Indian Citizen         </p> <p><input type="checkbox"/> (ii) I object to proposed inclusion of name of the person mentioned below due to any one of the following reasons - (tick any one)</p> <p style="margin-left: 40px;"> <input type="checkbox"/> Death                      <input type="checkbox"/> Under Age                      <input type="checkbox"/> Absent / Permanently shifted  <input type="checkbox"/> Already enrolled              <input type="checkbox"/> Not Indian Citizen         </p> <p><input type="checkbox"/> (iii) I request to delete my name from electoral roll due to any one of the following reasons-(tick any one)</p> <p style="margin-left: 40px;"> <input type="checkbox"/> Permanently shifted              <input type="checkbox"/> Already enrolled              <input type="checkbox"/> Not Indian Citizen         </p> <p style="margin-left: 40px;">Death Certificate attached (Tick the appropriate option) <input type="checkbox"/> Yes    <input type="checkbox"/> No</p>																					
<p>(3) The details of the person in respect of whom objection has been raised, are as below:-</p> <p>Name _____ Surname _____ EPIC No.(if available) _____</p>																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Address</td> <td style="width: 30%;">House/Building/ Apartment No.</td> <td style="width: 50%;"></td> </tr> <tr> <td></td> <td>Town/Village</td> <td></td> </tr> <tr> <td></td> <td>PIN Code</td> <td><input type="text"/></td> </tr> <tr> <td></td> <td>District</td> <td><input type="text"/></td> </tr> </table>	Address	House/Building/ Apartment No.			Town/Village			PIN Code	<input type="text"/>		District	<input type="text"/>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Street/Area/Locality/ Mohalla/Road</td> <td style="width: 30%;"></td> </tr> <tr> <td>Post Office</td> <td></td> </tr> <tr> <td>Tehsil/Taluqa/Mandal</td> <td></td> </tr> <tr> <td>State/UT</td> <td></td> </tr> </table>	Street/Area/Locality/ Mohalla/Road		Post Office		Tehsil/Taluqa/Mandal		State/UT	
Address	House/Building/ Apartment No.																				
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Street/Area/Locality/ Mohalla/Road																					
Post Office																					
Tehsil/Taluqa/Mandal																					
State/UT																					
<p><b>DECLARATION</b></p> <p>I HEREBY DECLARE that to the best of my knowledge and belief that I am aware that making a statement or declaration 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> <p>Date: _____</p> <p>Place: _____ Signature of Applicant/Thumb Impression _____</p>																					
<p><i>Accessibility Instructions:-</i> 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, autism, 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.</p>																					
<p>✂ <b>Acknowledgement/Receipt for application</b> ✂</p>																					
<p>Acknowledgment Number _____ Date _____</p> <p>Received the application in Form 7 of Shri/Smt./Ms. _____</p> <p>[Applicant can refer the Acknowledgement No. to check the status of application.]</p>																					
<p>Name/Signature of ERO/AERO/BLO _____</p>																					

**GUIDELINES FOR FILLING UP THE APPLICATION**  
**FORM-7**

1. **General Instruction:-**

- (a) The application can be made by an elector registered in the existing electoral roll of the constituency.
- (b) The application can be an objection in respect of a registered elector/ an objection to the proposed inclusion of an entry in the electoral roll of the constituency, in which the applicant himself is registered **OR** a request for deletion of the applicant's own name from electoral roll.

2. **Item No. 1 (Name of the applicant)-** The applicant shall mention his name, EPIC no. and mobile number of self 'or' relative (father/mother/husband/legal guardian).

3. **Item No. 2 (Option of objection/application of deletion):-** The applicant has to tick any one option for which he intends to make the application. He must also tick any one of the reasons mentioned below the option, as to why according to him, the person against whom the objection has been made, is not qualified for inclusion in the electoral roll viz. due to death, under age, absent/permanently shifted, already enrolled in the electoral roll at the same place or some other place, not an Indian citizen etc. The onus of proof to substantiate the reason given for objection or removal of name lies with the applicant.

4. **Item No. 3 (Details of the person in respect of whom objection has been made):-** The applicant has to fill up the name, surname, EPIC number and address of the person whose entry is objected to for inclusion or sought to be deleted.

5. **DECLARATION:-** The applicant must give a 'DECLARATION' that the facts and particulars mentioned in the application are true to the best of his/her knowledge and belief.

**Please note that giving any false statement made in the DECLARATION portion is a punishable offence under section 31 of the Representation of the People Act, 1950 (43 of 1950) with imprisonment with a term which may extend to one year or with fine or with both.**

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**Form-8**

[See rules 13(3) and 26]

**ELECTION COMMISSION OF INDIA**

FORM No. \_\_\_\_\_

(To be filled by office)

**Voter Application Form for shifting of Residence/Correction of Entries in Existing Electoral Roll/Replacement of EPIC/Marking of PwD**

To,  
The Electoral Registration Officer,  
No. & Name of Assembly Constituency No.  Name \_\_\_\_\_  
Or No. & Name of Parliamentary Constituency@ No.  Name \_\_\_\_\_  
(@ only for Union Territories not having Legislative Assembly)

(I) Name of the applicant   
EPIC No. \_\_\_\_\_

Aadhaar Details:- (Please tick the appropriate box)

- (a)  Aadhaar Number  or  
(b)  I am not able to furnish my Aadhaar Number because I don't have Aadhaar Number.

Mobile No. of Self (or) Mobile No. of Father/Mother/Any other relative (if available) 

Email Id of Self (or) \_\_\_\_\_

Email Id of Father/Mother/Any other relative (if available) \_\_\_\_\_

(II) I submit application for (Tick any one of the following)

1.  Shifting of Residence (or)
2.  Correction of Entries in Existing Electoral Roll (or)
3.  Issue of Replacement EPIC without correction (or)
4.  Request for marking as Person with Disability

**1. Application for Shifting of Residence**

I have shifted my residence and I request that my name may be deleted from the previous address and shifted to the current address mentioned below. I request that a replacement EPIC may be issued to me due to change in my address. I hereby return my old EPIC.

Present Ordinary Residence (Full Address)	House/Building/Apartment No.	<input type="text"/>	Street/Area/Locality/ Mohalla/Road	<input type="text"/>
	Town/Village	<input type="text"/>	Post Office	<input type="text"/>
	PIN Code	<input type="text"/>	Tehsil/Taluqa/Mandal	<input type="text"/>
	District	<input type="text"/>	State/UT	<input type="text"/>

Self-attested copy of address proof either in the name of applicant or anyone of the parents/spouse/adult child, if already enrolled with as elector at the same address (Attach any one of the documents mentioned below ^):-

1.  Water/Electricity/Gas connection Bill for that address (atleast 1 year)
2.  Aadhaar Card
3.  Current passbook of Nationalized/Scheduled Bank/Post Office
4.  Indian Passport
5.  Revenue Department's Land Owning records including Kisan Bahi
6.  Registered Rent Lease Deed (In case of tenant)
7.  Registered Sale Deed (In case of own house)

Any Other:- (Pl. Specify) \_\_\_\_\_



**GUIDELINES FOR FILLING UP THE APPLICATION**  
**FORM-8**

1. **General Instruction:-**
  - (a) The application can be made by a registered/enrolled elector for shifting of residence, or for correction of entries or for issue of replacement EPIC or for marking as PwD.
  - (b) In case of approval of application by Electoral Registration Officer (ERO) for shifting of residence, correction of entries and issue of replacement EPIC without correction, a new replacement EPIC will be issued to the applicant and he has to return his old EPIC to the Electoral Registration Officer immediately.
2. **Item No. I (Name of the applicant)-** The applicant shall mention his name, EPIC no., Aadhaar number, mobile number and email id of self or relative mentioned therein. Aadhaar Number should be furnished for the purpose of authentication of entries. If the applicant does not have Aadhaar number, the same may be mentioned in box at item I (b).
3. **Item No. II (Option for application)-** The applicant has to tick any one of the options for making application and fill the details in the relevant section of the application. All other sections which are not relevant should be struck off.
4. **Application for shifting of residence-**
  - (a) The application has to be made to the Electoral Registration Officer of the constituency in which the new address of the applicant is located.
  - (b) The applicant has to mention his new address, where he has shifted to and presently staying and attach a self-attested copy of any one of the mentioned documents as address proof in his own name or in name of his parents/spouse. He has to tick the mentioned document which he has given as address proof. Mentioned document will ensure speedy delivery of services. If he does not possess any of the mentioned documents, he has to mention name of the other document given for address proof in the blank space.
5. **Application for correction of entries in existing roll-**
  - (a) If an applicant intends to get any existing entry relating to him in the electoral roll corrected, he has to tick in the appropriate box and attach the document in the support of his claim. The name of the document must be mentioned in the blank space given.
  - (b) In case, the applicant desires to change his photograph, he has to paste a recent good quality passport size unsigned colour photograph (4.5 cm X 3.5 cm) with white background, in the box meant for it.
6. **Application for replacement EPIC without correction-** The applicant shall put a tick in appropriate box seeking for a replacement EPIC. He shall return his mutilated/old EPIC or submit a copy of FIR/Police report for lost EPIC.
7. **DECLARATION-** The applicant must give a 'DECLARATION' that the facts and particulars mentioned in the application are true to the best of his/her knowledge and belief.  
**Please note that giving any false statement made in the DECLARATION portion is a punishable offence under section 31 of the Representation of the People Act, 1950 (43 of 1950) with imprisonment with a term which may extend to one year or with fine or with both. "**

14. For Forms 11 and 11A to the said rules, the following Forms shall be substituted, namely:—

**“FORM 11**

[See rules 15 and 16]

**LIST OF OBJECTIONS/ APPLICATION FOR CORRECTION OF ENTRIES/REPLACEMENT OF EPIC/ MAKING OF PWD RECEIVED IN FORM 8**

Designated location identity (where applications have been received)		Constituency (Assembly/Parliamentary <sup>£</sup> Constituency			Revision Identity		
1. List number <sup>@</sup>		2. Period of receipt of applications (covered in this list)			From date	To date	
					...../...../.....	...../...../.....	
3. Place of hearing*							
Serial Number <sup>§</sup> of application	Date of receipt	Name of elector objecting/ making application	Reasons for objection/ applications			Date of hearing*	Time of hearing*
			Whether correction of entry (Y/N)	Whether replacement of EPIC (Y/N)	Whether marking of PwD		
1	2	3	4	5	6	7(a)	7(b)
£ In case of union territories having no Legislative Assembly @ For this revision for this designated location *Place, time and date of hearing as fixed by Electoral Registration Officer. § Running serial number is to be maintained for each revision for each designated location			Date of exhibition at designated location under rule 15 (b)			Date of exhibition at Electoral Registration Officer's office under rule 16(b)	

**FORM 11A**

[See rules 15 and 16]

**LIST OF APPLICATIONS FOR SHIFTING OF ADDRESS WITHIN THE CONSTITUENCY RECEIVED IN FORM 8**

Designated location identity (where applications have been received)		Constituency (Assembly/Parliamentary <sup>£</sup> Constituency		Revision Identity	
1. List number <sup>@</sup>		2. Period of receipt of application (covered in this list)		From date	To date
				...../...../.....	...../...../.....

3. Place of hearing*				
Serial Number <sup>§</sup> of application	Date of receipt	Name of elector objection/ making application	New Address (Present place of ordinary residence)	Date/Time hearing*
1	2	3	4	5
£ In case of union territories having no Legislative Assembly @ For this revision for this designated location *Place, time and date of hearing as fixed by Electoral Registration Officer. § Running serial number is to be maintained for each revision for each designated location			Date of exhibition at designated location under rule 15(1) (b)	Date of exhibition at Electoral Registration Officer's office under rule 16(b)

**FORM 11B**  
[See rules 15 and 16]

**LIST OF APPLICATIONS FOR SHIFTING OF ADDRESS OUTSIDE THE CONSTITUENCY RECEIVED IN FORM 8**

Designated location identity (where applications have been received)	Constituency (Assembly/Parliamentary <sup>‡</sup> Constituency)	Revision Identity		
		From date	To date	
1. List number <sup>@</sup>	2. Period of receipt of application (covered in this list)	...../...../.....	...../...../.....	
3. Place of hearing*				
Serial Number <sup>§</sup> of application	Date of receipt	Name of elector objection/ making application	New Address (Present place of ordinary residence)	Date/Time hearing*
1	2	3	4	5
£ In case of union territories having no Legislative Assembly @ For this revision for this designated location *Place, time and date of hearing as fixed by Electoral Registration Officer. § Running serial number is to be maintained for each revision for each designated location			Date of exhibition at designated location under rule 15(1) (b)	Date of exhibition at Electoral Registration Officer's office under rule 16(b)".



**"Form-18"**  
(See Rule 31)

**ELECTION COMMISSION OF INDIA**

**Claim for inclusion of name in the electoral roll for a Graduates' Constituency**

SPACE FOR PASTING  
ONE RECENT UNSIGNED  
PASSPORT SIZE COLOR  
PHOTOGRAPH (4.5 CM X  
3.5 CM) SHOWING  
FRONTAL VIEW OF FULL  
FACE WITH WHITE  
BACKGROUND

To,  
The Electoral Registration Officer,  
\_\_\_\_\_ (Graduates) Constituency.

Sir,

I request that my name be registered in the electoral roll for the.....(Graduates') Constituency.

1. The particulars are:-

Full Name \_\_\_\_\_ Sex \_\_\_\_\_

Father's/Mother's/Husband's Name (in full) \_\_\_\_\_

Qualification \_\_\_\_\_

Occupation \_\_\_\_\_

House Address (Place of ordinary residence)

House/Building/Apartment No.	Street/ Mohalla
Town/Village	Post Office
Police Station/Tehsil/Taluqa/Mouza	
District	State

Age  Years  Months Date of Birth

Disability (if any):- (Tick appropriate box) (optional Field)

Visual impairment  Speech & hearing disability  Locomotor disability  Other

Whether registered as an elector for any assembly constituency \_\_\_\_\_

If yes, then mention the following---

(a) Number and Name of the Assembly constituency \_\_\_\_\_

(b) Part/Polling Station No. (if known) \_\_\_\_\_

(c) Date of Birth

(d) EPIC Number (if any) \_\_\_\_\_

Aadhaar Details:- (Please tick the appropriate box)

(a)  Aadhaar Number \_\_\_\_\_ or

(b)  I am not able to furnish my Aadhaar Number because I don't have Aadhaar Number

Contact Number :-

Mobile No. (optional) \_\_\_\_\_

Landline \_\_\_\_\_

Email Id (if any) \_\_\_\_\_

2. \*I am a graduate of the.....University having passed the degree/diploma examination in the year .....

OR

\*I am in possession of a diploma/certificate in.....which is a qualification equivalent to that of a graduate University in India having passed the examination for the diploma/certificate in the year.....

3. In support of my claim as being a graduate/in possession of the above diploma/certificate. I submit herewith.....

4. \*\*My name has not been included in the electoral roll for this or any other graduates' constituency.

OR

\*\*My name has been included in the electoral roll for the.....graduates' constituency under the address given below and I request that it be deleted from that roll

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. I declare that I am a citizen of India and that all the particulars given above are true to the best of my knowledge and belief.

Place \_\_\_\_\_

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of claimant

NOTE : Any person who makes a statement or declaration which is false and which he either knows or believes to be false or does not believe to be true is punishable under section 31 of the Representation of the People Act, 1950.

\*Strike off the paragraph not applicable.

\*\*Strike off the inappropriate alternative.

.....(Perforation).....

Intimation of action taken

The application in Form 18 of Shri/Smt./Kumari.....address.....has been—

(a) accepted and the name of Shri/Smt./Kumari.....has been registered at Serial No.....in Part No.....

(b) rejected for the reason.....

Date \_\_\_\_\_

Electoral Registration Officer,  
(Address) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

.....(Perforation).....

Receipt of application

Received the application in Form 18 from Shri/ Smt./Kumari\*.....address\*.....

Date \_\_\_\_\_

Electoral Registration Officer,  
(Address) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\*To be filled in by the applicant



Form-19

(See Rule 31)

ELECTION COMMISSION OF INDIA

Claim for inclusion of name in the electoral roll for a Teachers' Constituency

SPACE FOR PASTING ONE RECENT UNSIGNED PASSPORT SIZE COLOR PHOTOGRAPH (4.5 CM X 3.5 CM) SHOWING FRONTAL VIEW OF FULL FACE WITH WHITE BACKGROUND

To, The Electoral Registration Officer, (Teachers') Constituency.

Sir,

I request that my name be registered in the electoral roll for the.....(Teachers') Constituency.

The particulars are:-

Full Name Sex

Father's/Mother's/Husband's Name (in full)

House Address (Place of ordinary residence)

Table with 2 columns: House/Building/Apartment No., Street/ Mohalla, Town/Village, Post Office, Police Station/Tehsil/Taluqa/Mouza, District, State

Age Years Months Date of Birth

Disability (if any):- (Tick appropriate box) (optional Field)

Visual impairment Speech & hearing disability Locomotor disability Other

Whether registered as an elector for any assembly constituency

If yes, then mention the following---

- (a) Number and Name of the Assembly constituency
(b) Part/Polling Station No. (if known)
(c) Date of Birth
(d) EPIC Number (if any)

Aadhaar Details:- (Please tick the appropriate box)

- (a) Aadhaar Number or
(b) I am not able to furnish my Aadhaar Number because I don't have Aadhaar Number

Contact Number :-

Mobile No. (optional) Landline Email Id (if any)

2. During the last six years, I have been engaged in teaching for a total period of more than three years as follows-

Table with 4 columns: Name of Educational Institution, From (Date), To (Date), Period

In support of the above, I submit herewith

3. \*My name has not been included in the electoral roll for this or any other teachers' constituency.

OR

\*My name has been included in the electoral roll for the.....teachers' constituency under the address given below and I request that it be deleted from that roll :-

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. I declare that I am a citizen of India and that all the particulars given above are true to the best of my knowledge and belief.

Place \_\_\_\_\_  
Date \_\_\_\_\_

\_\_\_\_\_  
Signature of claimant

NOTE : Any person who makes a statement or declaration which is false and which he either knows or believes to be false or does not believe to be true is punishable under section 31 of the Representation of the People Act, 1950.

\*Strike off the paragraph not applicable.

.....(Perforation).....  
Intimation of action taken

The application in Form 19 of Shri/Smt./Kumari..... address  
..... has been-

- (a) accepted and the name of Shri/Smt./Kumari.....has been registered at Serial No..... in Part No.....
- (b) rejected for the reason.....

Date \_\_\_\_\_

Electoral Registration Officer,  
(Address) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

.....(Perforation).....  
Receipt of application

Received the application in Form 18 from Shri/ Shrimati/Kumari\*.....  
address\*.....

Date \_\_\_\_\_

Electoral Registration Officer,  
(Address) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*To be filled in by the applicant".