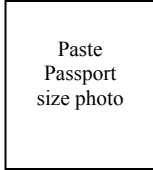


REQUEST FOR THE DUPLICATE EPIC

To,

Electoral Registration Officer,
AC No. & Name _____
District _____



I have misplaced /lost my EPIC. The particular's of my EPIC is as under:-

AC No. & Name:	Part No:
Sr. No. in Part /Voter No:	EPIC No:
Sex:	Age:
Date of Birth (DOB)	House No.:
Applicant Name (in English)	
Applicant Name (in Hindi)	
Relation's Name (in English)	
Relation's Name (in Hindi)	
Type of Relation's (in English)	Type of Relation's (in Hindi)
Address (in English)	
Address (in Hindi)	

I have deposited duplicate EPIC fees of Rest. 25/- against challan No. Dated atyou are requested to issue me my Duplicate Card.

Thanking You,

Date:
Palce:

(Signature of Applicant)
Name:.....

Note:-For any deviation/changes in any fields from existing/published Photo Electoral Roll, a required supplement from ERO is mandatory in the attached with this application.

ERO

Kanungo

ET/ENT

Dy. DEO