



ELECTION COMMISSION OF INDIA

FORM-8A

Acknowledgement No. _____

(See Rules 13(4) and 26) of Registration of Electors Rule-1960

(To be filled by office)

Application for Transposition of Entry in Electoral Roll (in case of Shifting from One Place of Residence to Another Place of Residence within Same Constituency)

To, The Electoral Registration Officer,.....Assembly / Parliamentary Constituency

SPACE FOR PASTING
ONE RECENT PASSPORT
SIZE PHOTOGRAPH (3.5
CM X 3.5 CM) SHOWING
FRONTAL VIEW OF FULL
FACE WITHIN THIS BOX

I request that entry in the electoral roll for the above mentioned Constituency relating to Myself should be transposed to the relevant part of the roll in this constituency because I have shifted my place of ordinary residence within the same constituency.

Particulars of the applicant

(a) Name

(b) Surname(if any)

(c) Part No. (d) Serial No.

(d) EPIC No. (if issued)

(e) Email id (optional)

(f) Mobile No. (optional)

(g)Current address of my ordinary residence where I have shifted House No.

Street/Area/Locality

Town/Village

Post Office Pin Code

District State/UT

DECLARATION- I hereby declare that the facts and particulars mentioned above are true to the best of my knowledge and belief.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 the Representation of the People Act, 1950 (43 of 1950).

Place.....

Date.....

Signature of Applicant.....

Remarks of Field Level Verifying Officer:

**Details of action taken
(To be filled by Electoral Registration Officer of the constituency)**

The application of Shri/Smt./Km. for transposition of entry relating to himself/
herself/ Shri/ Smt. / Km.in the electoral roll in Form 8A has been accepted/rejected.

Detailed reasons for acceptance or rejection [under or in pursuance of rule 26(4)] are given below:

Place:

Date:

Signature of ERO

Seal of the ERO

Intimation of decision taken (to be filled by Electoral Registration Officer of the constituency and to be posted to the applicant on the address as given by the applicant)

The application in Form 8A of Shri/Shrimati/Kumari.....

Postage Stamp
to be affixed by
the Electoral
Registration
Authority at the
time of dispatch

Current address where applicant is ordinarily residence

House No.

Street/Area/Locality

Town/Village

Post Office

Pin Code

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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District

State/UT

Has been (a) accepted and the name of Shri/Shrimati/Kumari..... has been
deleted from Part No and registered at Sl.No..... in Part No.....
of AC No.....

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

Date:

Electoral Registration Officer

Address.....

Acknowledgement/Receipt

Acknowledgement Number _____

Date _____

Received the application in form 8A 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-8A**

How to Fill the Form-8A

1. The application should be addressed to the Electoral Registration Officer of the constituency in which transpositions of the relevant entry is required. The name of the constituency should be mentioned in the blank space.
2. In Item (a) and (b) of the Application, the applicant should write his name, as existing in the electoral roll. In case the initials to applicant's name printed in the electoral roll are in abbreviated form and he wants them to be printed in expanded form he can write his full name in expanded form. The full name except the surname should be written in the first box and surname should be written in the second box. In case the applicant does not have a surname, the given name only should be written. Caste should not be mentioned except where the caste name is used as part of the elector's name or a surname. Honorific appellations like Shri, Smt. Kumari, Khan, Begum, Pandit etc. should not be mentioned.
3. Item (c) and (d): Fill the name Part No. & Serial No. of the electoral roll where already registered and Electors Photo Identity Card No.(EPIC) in full. (as printed in the electoral roll).
4. In item (g) of the Application please mention the complete address of the new place where the Applicant/person concerned has shifted place of ordinary residence within the constituency. Please do not write incomplete address as in that case it may not be possible to link the address to the relevant part of electoral roll where the entry is required to be transposed.
5. Full name and address may also be given on the intimation portions. The Applicant may give his mobile number and E-mail I.D in the Form, which is optional, as the same, if given, may be used by the Electoral Registration Officer for further communication with the applicant whenever required.

Replacement EPIC

If the Applicant wants replacement EPIC with new address, he should apply for the same in Form EPIC-001 (as per the Format as Annexure I), with requisite fee for replacement EPIC, and old EPC, after enrolment at the new place on the basis of Form 8A.

ANNEXURE I (For Form 8A)

Election Commission of India (ANNEXURE-I) Application for Issue of Replacement Elector's Photo Identity Card (EPIC)		FORM ID ECI-EPIC-001	
A	State/ UT :		
	AC ^s (No. & Name):		
	District:		
B Elector's Particulars (To be filled by Elector)			
To, The Electoral Registration Officer, Assembly/ Parliamentary ^s Constituency	Sir/Madam, I request that a Duplicate Electoral Photo identity Card be issued to me as my original card is lost/destroyed/mutilated due to corrections in my elector's detail or due to change of address I want to get afresh card with my new address. I am returning my EPIC to you along with fee for issue of duplicate EPIC My name is included in the electoral roll for the above constituency. Particulars in support of my claim for issue of duplicate EPIC are given below:		
1. Name of Elector:	2. EPIC No of Original card (if known) .:		
3. Father's/ Mother's/ Husband's* Name :	4. Sex (M/F):	5. Date of Birth (DOB) if not known then Age in Years)as on 1st Jan, 200____,.....	
6. Address			
(i) House / Door number :			
(ii) Street/ Mohalla / Road/ Gali :			
(iii)Area / Locality :			
(iv) Town/Village :	(v) PIN CODE		
(vi) Police Station :	(vii) District:		
(viii) Reasons for applying for a Duplicate card			
1. I will collect EPIC from VRC/CSC 2. I wish to receive my EPIC by Post(self addressed and stamped envelope enclosed) 3. I will collect EPIC from BLO.			
(_____) Signature of the applicant			
(ix) Tick (✓)the appropriate box: I hereby return my mutilated /old card. I undertake to return the earlier card issued to me if the same <input type="checkbox"/> recovered at a later date.		Date: Place:	
<input type="checkbox"/> For official Use			
<i>Authentication for Issue of EPIC (To be filled by ERO's Representative)</i>			
Part No. :	Serial No. of Elector in Part :	ID number of Designated Photography Location (DPL) or Common Service centers (CSE).:	#Token No. or Receipt No.
Register No.	Serial No. in Register		
Verified by:	Signature		
Date: ___/___/200__			
D Acknowledgement of R- EPIC by the Elector			
Received Duplicate EPIC on (Date):		Elector's Signature or Thumb Impression	
- - - - - 200__			