FORM- 1A [see rule 9A(1)(a), 12C(1)]

Application for inclusion of name in voters list								
District Ele Gram Pand Block Zila Parish		anchayat),Ward I chayat Samiti, Ward Nu , Ward Nu uded in the vo	oter list fo	r the abov	ve Gran	PARECE SIZE (3.5 FROM F WITH		PH DF XX.
Samiti/Zila Parishad Particulars in support of my claim for inclusion in the below:- I. Applicant's details Name						Surname (if any)		
1. Applicant 3 details		Name				——————————————————————————————————————		
Age on Ist January		Years		Months		Sex Male/Female		
Date of Birth, if	Date of Birth, if		Day		h	Year		
known: Place of Birth :	Village/Town District					State		
*Father's		Name			Surnar	ne (if any))	
Mother's Name								
Husband's								
II. Particulars o	f place of ordii	 nary residenc	e (full add	ress)				
House/Door numb	er:							
Street/Area/Locali	ty/Mohalla/Roa	d:						
Town/Village:								
Post Office :			Pin Code	;				
Tehsil/Taluka/Mandal/Thana:								
District:								

III. Details of member(s) of applicant's family already included in the current voters list of the Gram Panchayat/Panchayat Samiti/Zila Parishad						
Name		Relationship with applicant	Part numl voters list Ward	ber of the	Serial number in that Part	Voter's Photo Identity Card Number
1.						
2.						
IV. Decl		n at to the best of my kr	nowledge a	nd belief:		
(i)	I am	a citizen of India.				
(ii)	I a	am ordinarily reside	nt at the	address g	given in para II	above since
	(date, month, year).					
(iii)	I have not applied for the inclusion of my name in voters list for any other Gram					
	Panchayat/ Panchayat Samiti/Zila Parishad.					
(iv)	*My name has not already been included in the voters list for this or any of other					
	Gram Panchayat/Panchayat Samiti/Zila Parishad.					
	OR					
	*My name may have been included in the voters list for Ward					
	Gram Panchayat,Panchayat Samiti,Zila					
	Parishad in State in which I was ordinarily resident earlier at the					
address mentioned below and if so, I request that the same may be deleted from						
that voters list.						
Full address	s (Earl	lier place of ordinary r	esidence):	Electors pl	noto Identity Card	(if issued)
				Number		
				Date of iss	ue	
Place :				<u> </u>		
Date :			S	ignature or t	humb impression o	of the 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 171 of the Haryana Panchayati Raj Act, 1994.

*Strike out the inappropriate alternative

Detail of action taken

(To be filled by District Electoral Officer)

The application of Shri/Sm	for inclusion of	
name in the electoral roll in	Form- 1A has been accepted*/rejec	eted*.
Detailed reasons for	acceptance or rejection [under or i	in pursuance of rule 10 of the
Haryana Panchayati Raj Ele	ection Rules, 1994]	
Place:	Signature of District Electoral	(Seal of the District Electora
Date:	Officer	Officer)
*Strike out the inappropriate	e alternative	
Remarks of Field Level Of	fficer (e.g. BLO, Designated Offic	er, Supervisory Officer)
Serial Number entered in th	e registerd	
Date and time fixed for hear	ring	
(Receipt for office use)		
Obtained the information	n about the date and time fixed for h	nearing of claim/objection.
Date:		
	Signature a	and Thumb Imperession of
		the applicant
Receipt of appl	lication and information about the (for applicant)	e date of hearing
	ion has been received in Formwho is resident of village	
	nearing in the application shall be d	
	ated at are directed to appear for he	
document/information.	are directed to appear for the	ailing alongwill necessary
Date:	Signature of the officer re	ceiving the application on
	Behalf of the District Elect	toral Officer
	(Address)