



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.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(d) Serial No.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
(d) EPIC No. (if issued)														
(e) Email id (optional)														
(f) Mobile No. (optional)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
(g)Current address of my ordinary residence where I have shifted					House No.									
Street/Area/Locality														
Town/Village														
Post Office								Pin Code	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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"/>
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