

Election Commission of India		FORM ID	
Application for Issue of Duplicate Elector's Photo Identity Card (EPIC)		ECI-EPIC-002	
<b>A</b>	State/UT : Chandigarh		
	PC <sup>s</sup> (No. & Name) : U02—Chandigarh		
	District : Chandigarh		Campaign ID :
<b>B</b>	Elector's particulars (To be filled by Elector)		
To,	Sir/Madam,		
The Electoral Registration Officer, ..... Parliamentary Constituency	I request that a Duplicate Electoral Photo Identity Card be issued to me as my original card is lost/destroyed/mutilated. My name is included in the electoral roll for the above constituency. Particulars in support of my claim for issue for duplicate EPIC are given below :		
1. Name of Elector :		2. EPIC No. of Original card :	
3. Father's/Mother's/ Husband 's Name		4. Sex (M/F) :	5. Age (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			
(ix) Tick (✓) the appropriate box :		Date :	Thumb Impression
<input type="checkbox"/> I hereby return my mutilated card.		Place :	or Signature of Elector
<input type="checkbox"/> I undertake to return the earlier card issued to me if the same is recovered at a later date.			
<b>C</b>	Authentication for Issue of EPIC (To be filled by ERO's Representative)		
Part No. :	Serial No. of Elector in Part :	Designated Photography Location (DPL) No. :	#Token No. or Receipt No.
Register No.	Serial No. in Register	Field Unit No. :	
Verified by :			
Date:—/—/200—	Signature	Personal ID No. (PIN)	
<b>D</b>	EPIC Details (To be filled by the Photography Team)		
EPIC Mode (Tick ✓ appropriate box)		Date of Photography	___/___/200__
<input type="checkbox"/> On-line		EPIC No.	
<input type="checkbox"/> Off-line			
Preparing EPIC (Tick appropriate box when complete)		Authorised issue of EPIC	Date of Issue
<input type="checkbox"/> Editing of Data		Signature	Personal ID No. (PIN) ERO's Rep.    ___/___/200/___
<input type="checkbox"/> Printout			
<input type="checkbox"/> Lamination			
<b>E</b>	Acknowledgement of Duplicate EPIC by the Elector		
Received Duplicate EPIC on (Date) :		Elector's Signature	
___/___/200__		or Thumb Impression	

\* Strike out the inappropriate alternative

\$ PC number in case of Union Territories not having Legislative Assemblies.

# Token No. for On-Line mode and Receipt No. (FORM ID ECI-EPIC-003) for Off-Line mode.