

Election Commission of India						FORM ID
Application for issue of Duplicate Elector's Photo Identity Card (EPIC)						ECI-EPIC-002
A	State/Ut : S-25 WEST BENGAL					
	AC^s (NO. & Name) :					
	District:			Campaign ID: WB -2000-01		
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. 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:			
3. Father's/ Mother's / Husband's* Name:		4. Sex (M/F):	5. Age (Years) as on 1 st 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: <input type="checkbox"/> I hereby return my mutilated card. <input type="checkbox"/> I undertake to return the earlier card issued to me if the same is recovered at a later date.		Date:	Thumb Impression			
		Place:	Or Signature of Elector:			
C 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: __/__/2000	Signature	Personal ID No.(PIN)				
D EPIC Details (To be filled by the Photography Team)						
EPIC Mode: (Tick ✓ appropriate box) <input type="checkbox"/> On-line <input type="checkbox"/> Off-line		Date of Photography ___/___/200__				
		EPIC No.:				
Preparing EPIC (Tick ✓ appropriate box when complete) <input type="checkbox"/> Editing of Data <input type="checkbox"/> Printout <input type="checkbox"/> Lamination		Authorised issue of EPIC		Date of Issue		
		Signature		Personal ID No.(PIN) of ERO's Rep.	___/___/200__	
E Acknowledgement of Duplicate EPIC by the Elector						
Received Duplicate EPIC on (Date):			Elector's Signature			
			Or Thumb Impression			
		-		-	200__	

* Strike out the inappropriate alternative.

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