Aadhaar card correction form in tamil pdf

Aadhar card correction form. Download aadhar card pdf.

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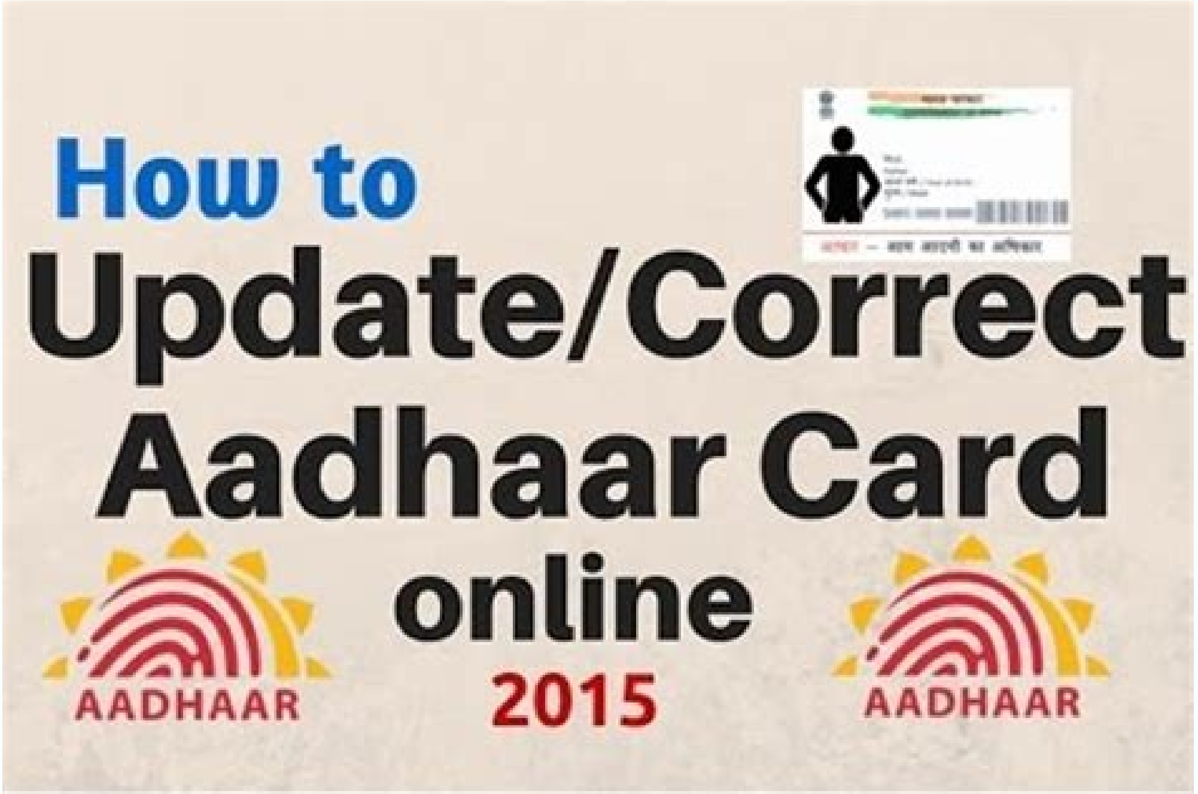

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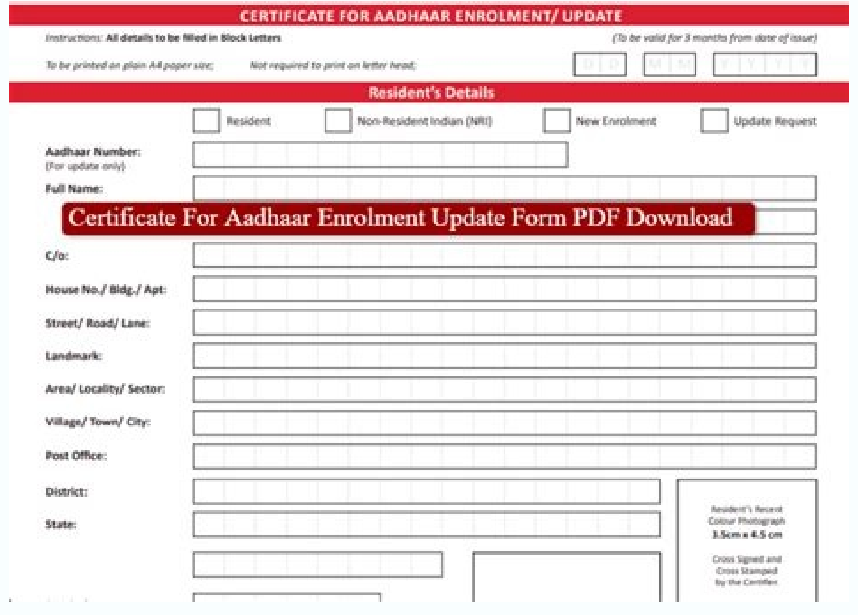

CERTIFICATE FOR AADHAAR ENROLMENT/ UPDATE

Instructions: All details to be filled in Block Letters (To be valid for 3 months from date of issue)

To be printed on plain A4 paper size; Not required to print on letter head;

Resident's Details

☐ Resident ☐ Non-Resident Indian (NRI) ☐ New Enrolment ☐ Update Request

Aadhaar Number: (For update only)

Full Name:

Certificate For Aadhaar Enrolment Update Form PDF Download

C/o:

House No./ Bldg./ Apt:

Street/ Road/ Lane:

Landmark:

Area/ Locality/ Sector:

Village/ Town/ City:

Post Office:

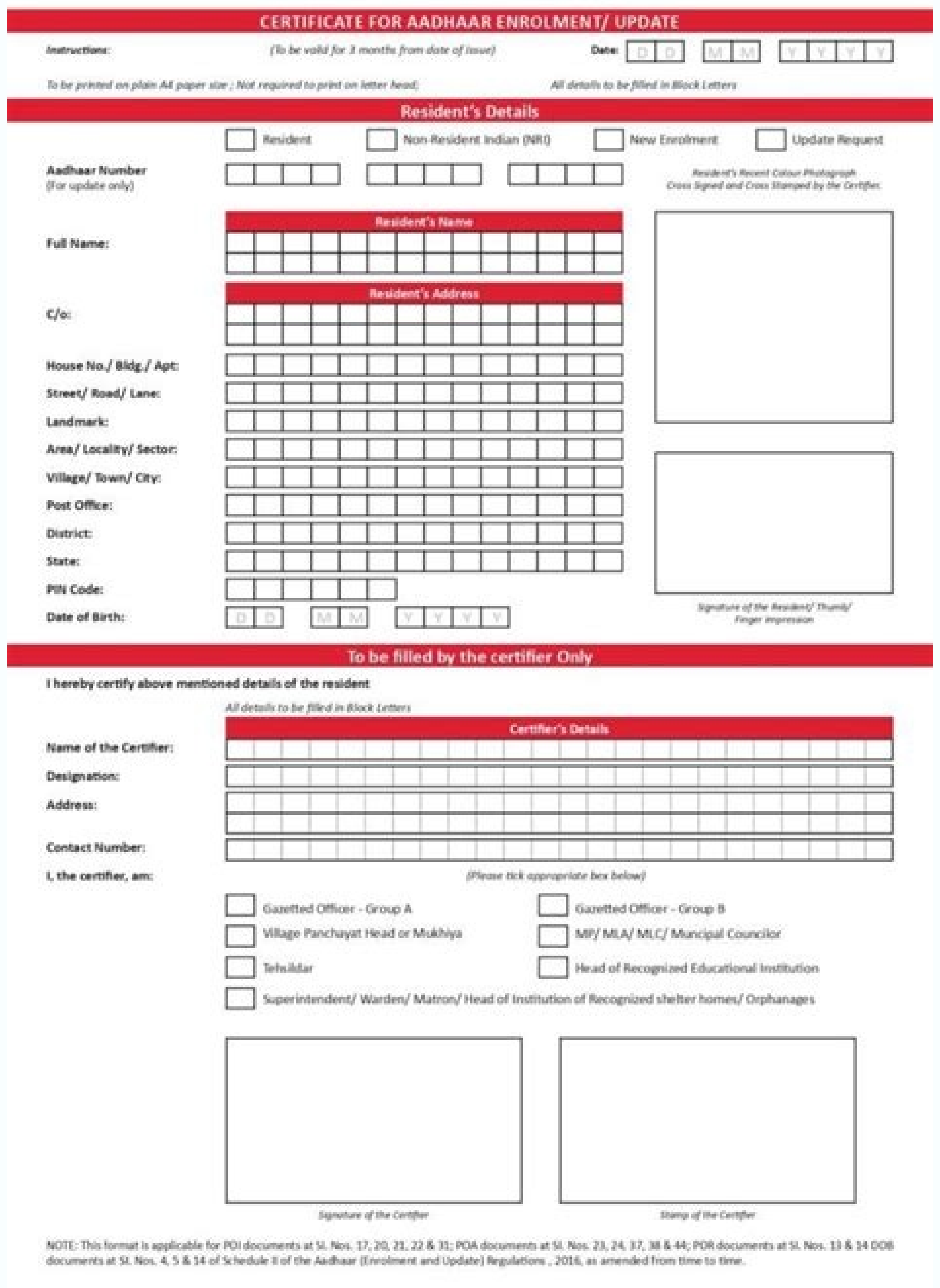
District:

State:

Resident's Recent Colour Photograph 3.5cm x 4.5 cm

Cross Signed and Cross Stamped by the Certifier.

[illegible] 12 [illegible]. [illegible]. [illegible].


CERTIFICATE FOR AADHAAR ENROLMENT/ UPDATE

Instructions: (To be valid for 3 months from date of issue) Date: D D M M Y Y Y Y

To be printed on plain A4 paper size ; Not required to print on letter head; All details to be filled in Block Letters

Resident's Details

☐ Resident ☐ Non-Resident Indian (NRI) ☐ New Enrolment ☐ Update Request

Aadhaar Number (For update only)

Resident's Recent Colour Photograph Cross Signed and Cross Stamped by the Certifier.

Resident's Name

Full Name:

Resident's Address

C/o:

House No./ Bldg./ Apt:

Street/ Road/ Lane:

Landmark:

Area/ Locality/ Sector:

Village/ Town/ City:

Post Office:

District:

State:

PIN Code:

Date of Birth: D D M M Y Y Y Y

Signature of the Resident/ Thumb/ Finger Impression

To be filled by the certifier Only

I hereby certify above mentioned details of the resident

All details to be filled in Block Letters

Certifier's Details

Name of the Certifier:

Designation:

Address:

Contact Number:

I, the certifier, am: (Please tick appropriate box below)

☐ Gazetted Officer - Group A ☐ Gazetted Officer - Group B

☐ Village Panchayat Head or Mukhiya ☐ MP/ MLA/ MLC/ Muncipal Councilor

☐ Tehsildar ☐ Head of Recognized Educational Institution

☐ Superintendent/ Warden/ Matron/ Head of Institution of Recognized shelter homes/ Orphanages

Signature of the Certifier Stamp of the Certifier

NOTE: This format is applicable for POI documents at Sl. Nos. 17, 20, 21, 22 & 31; POA documents at Sl. Nos. 23, 24, 37, 38 & 44; POR documents at Sl. Nos. 13 & 14 DOB documents at Sl. Nos. 4, 5 & 14 of Schedule II of the Aadhaar (Enrolment and Update) Regulations , 2016, as amended from time to time.

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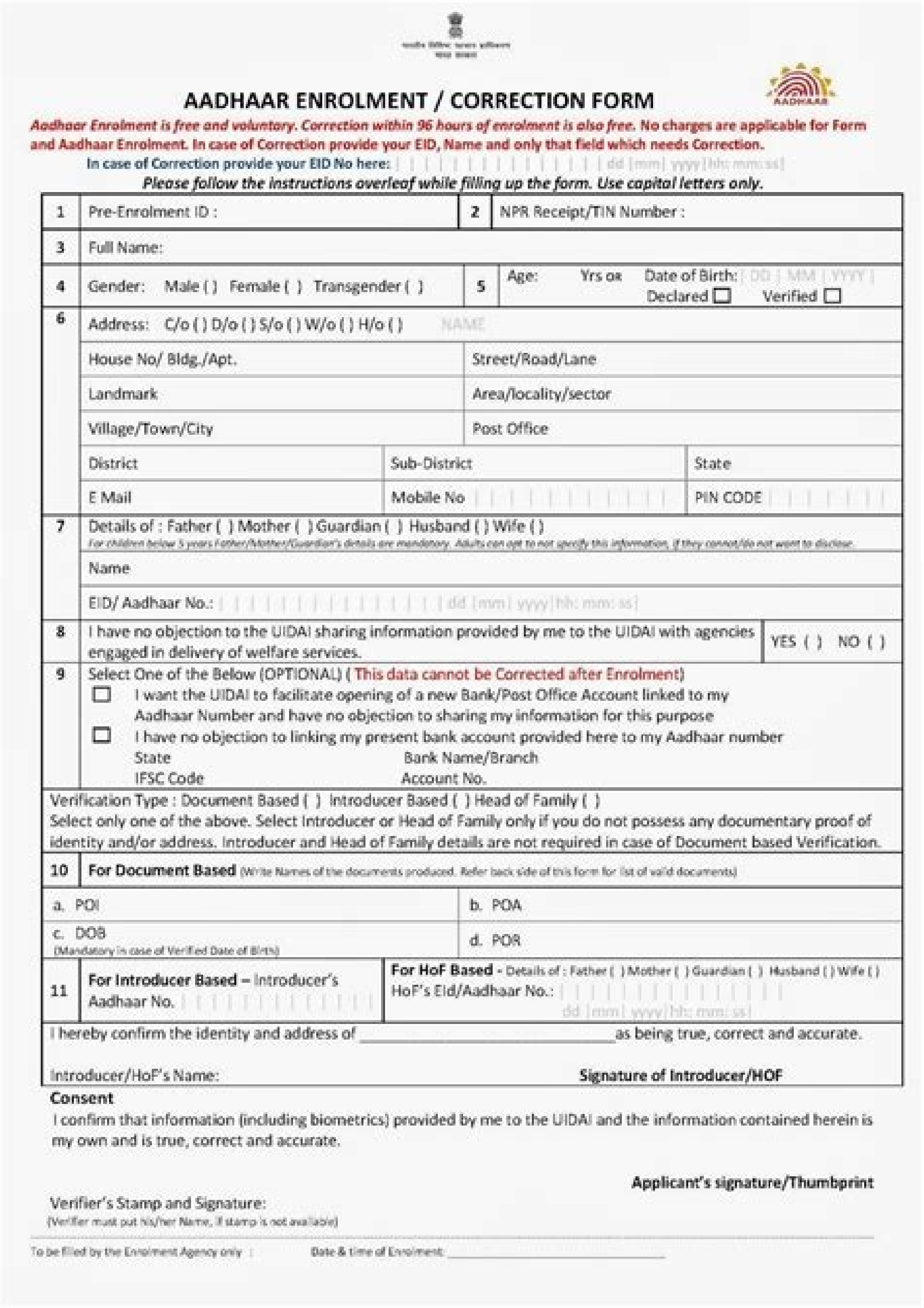


AADHAAR ENROLMENT / CORRECTION FORM

Aadhaar Enrolment is free and voluntary. Correction within 96 hours of enrolment is also free. No charges are applicable for Form and Aadhaar Enrolment. In case of Correction provide your EID, Name and only that field which needs Correction.

In case of Correction provide your EID No here: | | | | | | | | | | | | | | | dd [mm] yyyy [hh: mm: ss]

Please follow the instructions overleaf while filling up the form. Use capital letters only.

1	Pre-Enrolment ID :	2	NPR Receipt/TIN Number :
3	Full Name:		
4	Gender: Male ( ) Female ( ) Transgender ( )	5	Age: Yrs or Date of Birth: DD MM YYYY Declared ☐ Verified ☐
6	Address: C/o ( ) D/o ( ) S/o ( ) W/o ( ) H/o ( ) NAME		
	House No/ Bldg./Apt.		Street/Road/Lane
	Landmark		Area/locality/sector
	Village/Town/City		Post Office
	District / Sub-District		State
	E Mail / Mobile No		PIN CODE
7	Details of : Father ( ) Mother ( ) Guardian ( ) Husband ( ) Wife ( ) *For children below 5 years Father/Mother/Guardian's details are mandatory. Adults can opt to not specify this information, if they cannot/do not want to disclose.*		
	Name		
	EID/ Aadhaar No.: | | | | | | | | | | | | | | dd [mm] yyyy [hh: mm: ss]		
8	I have no objection to the UIDAI sharing information provided by me to the UIDAI with agencies engaged in delivery of welfare services.		YES ( ) NO ( )
9	Select One of the Below (OPTIONAL) (This data cannot be Corrected after Enrolment) ☐ I want the UIDAI to facilitate opening of a new Bank/Post Office Account linked to my Aadhaar Number and have no objection to sharing my information for this purpose ☐ I have no objection to linking my present bank account provided here to my Aadhaar number State Bank Name/Branch IFSC Code Account No.		

Verification Type : Document Based ( ) Introducer Based ( ) Head of Family ( )
Select only one of the above. Select Introducer or Head of Family only if you do not possess any documentary proof of identity and/or address. Introducer and Head of Family details are not required in case of Document based Verification.

10	**For Document Based** (Write Names of the documents produced. Refer back side of this form for list of valid documents)	
	a. POI	b. POA
	c. DOB (Mandatory in case of Verified Date of Birth)	d. POR
11	**For Introducer Based –** Introducer's Aadhaar No. | | | | | | | | | | | |	**For HoF Based -** Details of : Father ( ) Mother ( ) Guardian ( ) Husband ( ) Wife ( ) HoF's EId/Aadhaar No.: | | | | | | | | | | | | | | dd [mm] yyyy [hh: mm: ss]

I hereby confirm the identity and address of ______________________ as being true, correct and accurate.

Introducer/HoF's Name: **Signature of Introducer/HOF**

Consent

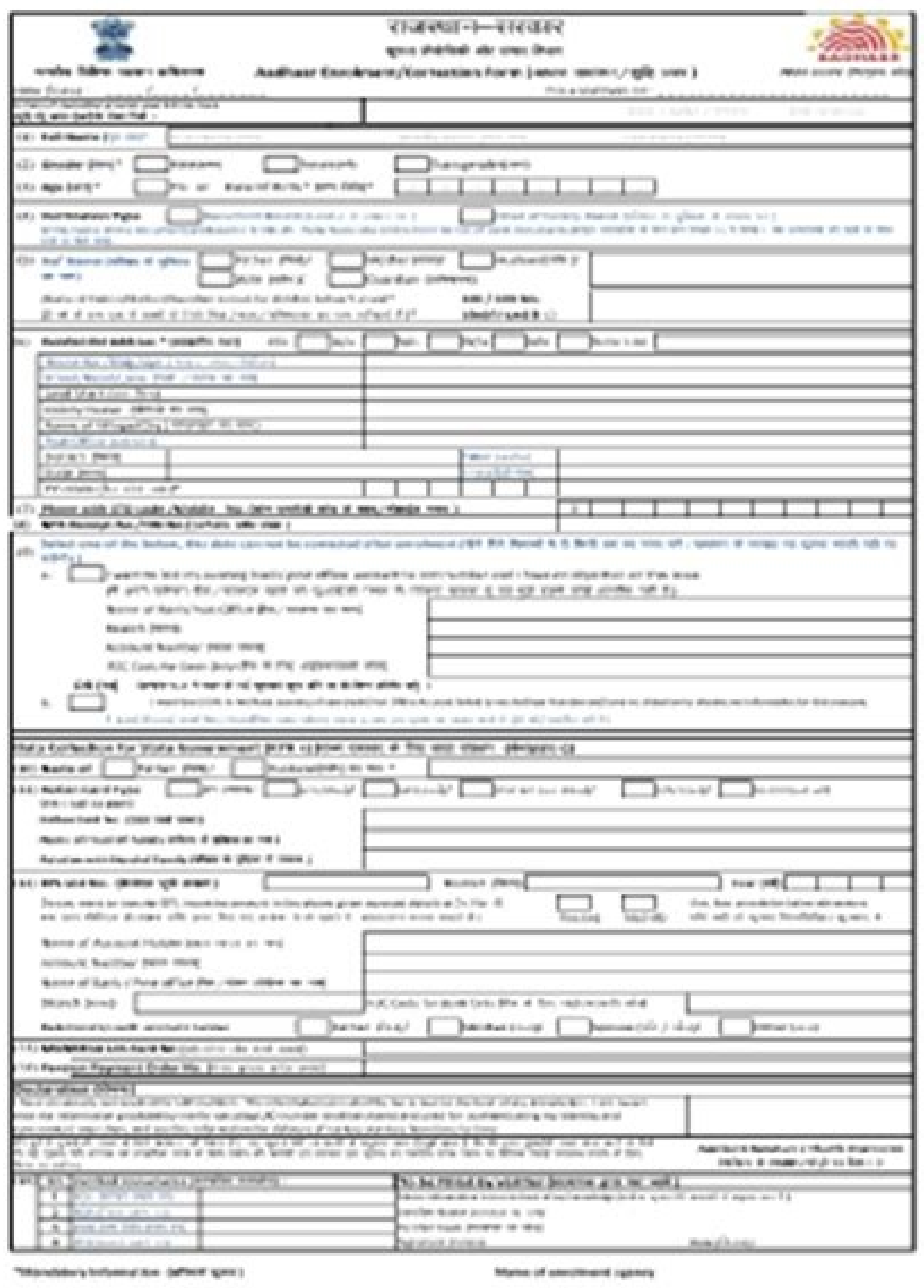
I confirm that information (including biometrics) provided by me to the UIDAI and the information contained herein is my own and is true, correct and accurate.

Applicant's signature/Thumbprint

Verifier's Stamp and Signature:
(Verifier must put his/her Name, if stamp is not available)

To be filled by the Enrolment Agency only : Date & time of Enrolment: ______________________

Open or Close [illegible]. [illegible]? Open or Close [illegible]. [illegible]. mAadhaar FAQs [illegible]? Open or Close [illegible], [illegible]. [illegible], [illegible].



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