**Election Commission of India**

**Application for issue of Duplicate Elector's Photo Identity Card (EPIC)**

**FORM ID**

| FORM ID | **ECI-EPIC-002** |

## A

State/UT (Code & Name):  
AC (No & Name):  
District:  
Campaign ID:  

## B

**Elector's Particulars (To be filled by Elector)**

To,  
The Electoral Registration Officer,  
....................................Assembly/Parliamentary Constituency.

Sir/Madam,  
I request that a Duplicate Elector 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 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) Reason for applying for a Duplicate Card  
   (ix) Tick (✓) the appropriate box:  
   I hereby return my mutilated card.  
   I undertake to return the earlier card issued to me if the same is recovered at a later date.  

Date:__/__200___  
Place:  
Thumb Impression or Signature of Elector:

## C

**Authentication for Issue of EPIC (To be filled by ERO's Representative)**

<table>
<thead>
<tr>
<th>Part No:</th>
<th>Serial No. of Elector in Part:</th>
<th>Designated Photography Location (DPL) No.:</th>
<th># Token No. or Receipt No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Register No.</td>
<td>Serial No. in Register</td>
<td>Field Unit No:</td>
<td></td>
</tr>
<tr>
<td>Verified by:</td>
<td></td>
<td>Signature</td>
<td>Personal ID No. (PIN)</td>
</tr>
</tbody>
</table>

Date:__/__200___  

## D

**EPIC Details (To be filled by Photography Team)**

EPIC Mode: (Tick ✓ appropriate box)  
- On-Line  
- Off-Line  

Prepating EPIC (Tick ✓ appropriate box when Complete)  
- Editing of Data  
- Printout  
- Lamination  

Date of Photography: ___/___/200___  
EPIC No.:  
Authorized issue of EPIC  
Signature:  
Personal ID No. (PIN) Of EROs Rep. ___/___/200___  
Date of issue:  

## E

**Acknowledgement of EPIC by the Elector**

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