



# ಬೆಂಗಳೂರು ನವನಿರ್ಮಾಣ ಪಕ್ಷ BENGALURU NAVANIRMANA PARTY



## NVSP PORTAL – NATIONAL VOTERS SERVICE PORTAL

### Step 1: Open the website - NVSP Portal

- Please click on the link given and the website should open like below. Link: <https://www.nvsp.in>
- Please use your mobile to register yourself by clicking on the “Login/Register” link

राष्ट्रीय मतदाता सेवा पोर्टल  
NATIONAL VOTERS' SERVICES PORTAL

English Home About Us Login

Login/Register to Avail following Facilities

- Form 6-Register as a New Elector/Voter
- Form 6A-Register as Overseas Elector/Voter
- Form 6B-Information of Aadhaar Number by Existing Electors
- Form 7-Objection and self Deletion
- Form 8-Application for Correction/Shifting/Duplicate EPIC and Marking of PwD
- Download E-epic

Login/Register

E-EPIC Download

Search in Electoral Roll

Download Electoral Roll PDF

Know Your

- Assembly/Parliamentary Constituency Details
- BL0/Electoral Officers Details
- Political Party Representative

Track Application Status

### Step 2: Login to the portal

UserName

Password

Captcha

fnXwW

fnXwW

Login

Forgot password ?

[Don't have account, Register as a new user.](#)

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## Step 3: On the home page, choose the options

- Please choose- Application for Correction/Shifting/Duplicate EPIC and Marking of PwD

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NATIONAL VOTERS' SERVICES PORTAL

English Home About Us Dashboard

Welcome : What would you like to do?

- Register as a New Elector/Voter
- Register as Overseas Elector/Voter
- Information of Aadhaar Number by Existing Electors
- Application for Correction/Shifting/Duplicate EPIC and Marking of PwD
- Objection and self Deletion
- Download E-epic

E-EPIC Download

Search in Electoral Roll

Voter Portal

Forms

Download Electoral Roll PDF

Know Your

- Assembly/Parliamentary Constituency Details
- BLO/Electoral Officers Details
- Political Party Representative

Track Application Status

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NATIONAL VOTERS' SERVICES PORTAL

Please provide below details.

Self  Family

Next

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## 4b. Correction of Entries in Existing Electoral Roll (Name,Gender,DOB,Age,Type of Relation, Name of Relative,Address,Mobile no.,Photograph)

Select Language English

Note :Fields marked with asterisk (\*) are mandatory

ELECTION COMMISSION OF INDIA  
Form 8  
(See rules 13(1) and 26)

I submit application for (Tick any one of the following)

Shifting of Residence  
 Correction of Entries in Existing Electoral Roll (Name,Gender,DOB,Age,Type of Relation,Name of Relative,Address,Mobile no.,Photograph)  
 Issue of Replacement EPIC without correction  
 Request for marking as Person with Disability

Voter Application Form for shifting of Residence/ Correction of Entries in Existing Electoral Roll/ Replacement of EPIC/ Marking of PwD

To

State \* Karnataka District

Assembly/Parliamentary Constituency \* Bommanahalli

Applicant's details

Name \* (In English) (In Regional)

Surname \* (In English) (In Regional)

EPIC No. \*

Address Number

I am not able to furnish Address number because I don't have Address number

Mobile No.(if available) +91 (In English) (In Regional)  Tick if Mobile No. of relative

Smart ID (if available) (In English) (In Regional)  Tick if Smart ID of relative

(Note: Mobile No. & Smart ID to used only for modifications)

2. Application for Correction of Entries in Existing Electoral Roll

Please tick the entry which is to be corrected

Name  Gender  Date of Birth/Age  Type of Relation  
 Name of Relative  Address  Mobile No.(if available)  My Photograph

The correct particulars in entry to be corrected are as below

Name (In English) (In Regional)

Surname (In English) (In Regional)

House/Door number/ House No. & House Name

Street/Area/Locality/ Wards/Block

Village/ Town

Post Office

Telard/Hubazur/Block

PIN Code

Date of Birth (dd/mm/yyyy)

Age as on 1st January

Relative's Name (In English) (In Regional)

Relative's Surname (In English) (In Regional)

Relation

Gender

Mobile No. +91

I request that a replacement EPIC may be issued to me due to changes in my personal details. I hereby return my old EPIC.

Declaration

I HEREBY DECLARE that to the best of my knowledge and belief that I am a citizen of India and I am aware that making 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 21 of Representation of the People Act, 1950 (or 125B) with imprisonment for a term which may extend to one year or with fine or with both.

Date \*

Signature \*

Printed \* Provided

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## 4c. Issue of Replacement EPIC without correction

**ELECTION COMMISSION OF INDIA**  
**Form 8**  
[See rules 13(1) and 26]

**I submit application for (Tick any one of the following)**

Shifting of Residence

Correction of Entries in Existing Electoral Roll (Name,Gender,DOB,Age,Type of Relation,Name of Relative,Address,Mobile no.,Photograph)

Issue of Replacement EPIC without correction

Request for marking as Person with Disability

**Voter Application Form for shifting of Residence/ Correction of Entries in Existing Electoral Roll/ Replacement of EPIC/ Marking of PwD**

To

State \*  District

Assembly/Parliamentary Constituency \*

**Applicant's details**

Name \*

Surname

EPIC No. \*

Aadhaar Number

I am not able to furnish Aadhaar number because I don't have Aadhaar number

Mobile No.(if available)    Tick if Mobile No. of relative

Email ID (if available)   Tick if Email ID of relative

(Note: Mobile No. & Email ID is used only for notifications)

**3. Application for Issue of Replacement EPIC without correction**

**Issue new EPIC**

I request that a replacement EPIC may be issued to me as my original EPIC is \*

Lost

Destroyed due to reason beyond control like floods, fire, other natural disaster etc.

Mutilated

I hereby return my mutilated/old EPIC (OR) I have attached copy of FIR/Police report for lost EPIC & I undertake to return the earlier EPIC issued to me if the same is recovered at a later stage.

**Declaration**

I HEREBY DECLARE that to the best of my knowledge and belief that I am a citizen of India and I am aware that making 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 Representation of the People Act,1950 (43 of 1950) with imprisonment for a term which may extend to one year or with fine or with both.

Place \*  Date \*

Captcha \*

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## 4d. Request for marking as Person with Disability

**ELECTION COMMISSION OF INDIA**

**Form 8**  
[See rules 13(1) and 26]

**I submit application for (Tick any one of the following)**

Shifting of Residence

Correction of Entries in Existing Electoral Roll (Name,Gender,DOB,Age,Type of Relation,Name of Relative,Address,Mobile no.,Photograph)

Issue of Replacement EPIC without correction

Request for marking as Person with Disability

**Voter Application Form for shifting of Residence/ Correction of Entries in Existing Electoral Roll/ Replacement of EPIC/ Marking of PwD**

To

State \*  District

Assembly/Parliamentary Constituency \*

**Applicant's details**

Name \*

Surname

EPIC No. \*

Aadhaar Number

I am not able to furnish Aadhaar number because I don't have Aadhaar number

Mobile No.(if available)    Tick if Mobile No. of relative

Email ID (if available)   Tick if Email ID of relative

(Note: Mobile No. & Email ID is used only for notifications)

**4. Application for Marking Person with Disability**

Locomotive  Visual  Deaf & Dumb

**Declaration**

I HEREBY DECLARE that to the best of my knowledge and belief that I am a citizen of India and I am aware that making 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 Representation of the People Act,1950 (43 of 1950) with imprisonment for a term which may extend to one year or with fine or with both.

Place \*  Date \*

Captcha \*

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## 4g. Declaration: Enter the details and submit

**Declaration**

I HEREBY DECLARE that to the best of my knowledge and belief that I am a citizen of India and I am aware that making 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 Representation of the People Act, 1950 (43 of 1950) with imprisonment for a term which may extend to one year or with fine or with both.

Place \*  Date\*

Captcha \*

## Step 5: Form Verification and Submission - Sample

Verify final form and submit. Select Back option to update.

 **FORM-8**  
ELECTION COMMISSION OF INDIA  
(See Rules 13(3) and 26)

*Voter Application Form for shifting of Residence/Correction of Entries in Existing Electoral Roll/ Replacement of EPIC/Marking of PwD*

To, The Electoral Registration Officer,  
Karnataka Bommanahalli  
Assembly / Parliamentary Constituency

I request that entry relating to myself appearing in the electoral roll the above Constituency is not correct and it should be corrected.

Name

Surname(if any)

EPIC No. (if issued)

Aadhaar Number

Mobile No. of Self (if available)  Relative

Email id of Self(if available)  Relative

(I) I submit application for (Tick any one of the following)

1.  Shifting of Residence (or)

2.  Correction of Entries in Existing Electoral Roll (or)

3.  Issue of Replacement EPIC without correction (or)

4.  Request for Marking as Person with Disability (or)

2. Application for Correction of Entries in Existing Electoral Roll

Please correct my following details in Electoral Roll/EPIC:

1.  Name 2.  Gender 3.  DoB/Age 4.  Relation Type

5.  Relation Name 6.  Address 7.  Mobile Number 8.  Photo

The correct particulars in entry to be corrected are as under:-

**DECLARATION**

I HEREBY DECLARE that to the best of my knowledge and belief that I am a citizen of India and 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 Representation of the People Act, 1950 (43 of 1950) with imprisonment for a term which may extend to one year or with fine or with both.

Place Bengaluru  
Date 23/08/2022

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## Note:

### NOTE

1. Accessibility Instructions:- In the light of provisions of Rights of Persons with Disabilities Act 2016 and Rights of Persons with Disabilities Rules, 2017, in case of persons with intellectual disability, autism, cerebral palsy and multiple disabilities etc., signature or left hand thumb impression of person with disability, or signature or left hand thumb impression of his/her legal guardian will be required.
2. In case of a married female applicant, name of Husband may preferably be mentioned.
3. Submission of self-attested copy of mentioned document will ensure speedy delivery of services.
4. In case none of the mentioned documents is available, field verification is must. As for example, category like homeless Indian citizens who are otherwise eligible to become electors but do not possess any documentary proof of ordinary residence, Electoral Registration Officer shall designate an officer for field verification.

- Post the confirmation, you will be given application '**Reference No**' as SMS to the mobile. Please keep this number handy and give it to you BNP volunteer
- You will also receive regular SMS updates of the application being processed confirmation message stating that your application has been processed
- **One last step**. Help us to track your application status by filling in this [Google Form](#). We will be happy to assist further.

**Together we can make a difference. Thank You**

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