	ELECTION DEPARTMENT MIZORAM	Г
	Registration of Electors (Annexure for Forms 6/7/8)	
Particulars of Applicant		
Name:		
Name of Relative:		
Street/Area/Locality:		
Remarks of Booth Level Officer		
Place: Date :	Signature of BLO	Seal of the BLO
Remarks of Field Level Verifying Officer		
Place:		
Date :	Signature of AERO	Seal of the AERO
Details of action taken (To be filled by Electoral Registration Officer of the Constituency)		
Decision Taken :	Accepted Rejected	
Remarks (if any) :		
Place:		
Date :	Signature of ERO	Seal of the ERO