

REGISTRATION OF ELECTORS ACT, NO. 44 OF 1980

FORM – ‘B’

SECTION 14 (2)

FORM OF CLAIM FOR ENTRY OR RETENTION OF NAME OF A PERSON IN THE REGISTER OF ELECTORS BY SOME OTHER PERSON ON HIS BEHALF

To the Registering Officer, Electoral District.

I hereby make this claim to have the name of the person, which is given below, and which has been omitted*/expunged* from the register of electors of the above mentioned electoral district, entered*/retained* in that register.

The particulars in respect of this claim are stated below:-

- (1) Full name of the person – Rev.*/Mr.*/Mrs.*/Miss*.....
.....
- (2) Qualifying address where the above mentioned person was resident on June 1, 20.....
 - (i) Assessment No :
 - (ii) Householder’s List No:
 - (iii) Street:
 - (iv) Village*/Town*/Estate*:
 - (v) Post Office:
 - (vi) Grama Niladhari’s Division:
 - (vii) Divisional Secretary’s Division:
- (3) Age on June 1, 20.....
 - (i) Years: Months:
 - (ii) Date of birth:
- (4) Any other particulars:
 - (i) Name as given in the National Identity Card:
 - (ii) National Identity Card Number:
 - (iii) Other particulars to be submitted: (Particulars of last/ previous registration/ if not registered in the previous year, reasons for failure.):
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(5) I hereby declare that,

(i) the person on whose behalf this claim is made is a citizen of Sri Lanka. Relevant particulars including the number and date of –

(a) the certificate of citizenship*/ certificate of registration*/ other citizenship document;

(b) certificate of birth and other documents in proof of birth, held by me are as follows:-

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.....

(ii) the person on whose behalf this claim is made was ordinarily resident at the address mentioned in item (2) above on the first day of June, 20.....

(iii) the person on whose behalf this claim is made has not made a claim or not furnished particulars using enumeration forms for registration under any other address in the above mentioned electoral district or in any other electoral district.

Declaration

I hereby declare that the above claim is true in all respects, the person on whose behalf this claim is made is qualified to be registered as an elector for the above mentioned electoral district and wish to submit all the relevant qualifications for the registration at the claim enquiry.

.....
Signature or thumb mark of Applicant

Name and Address of Applicant:

(Address to which the letters calling for information for enquiry be sent)

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.....
.....

Date:

* Delete words which are not applicable.