APPLICATION FOR BIRTH CERTIFICATE (Write in Capital Letters)

CIRCLE/LO	CALITY.	

Date of Birtin .	1.	Date of	Birth	:
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- 2. **Sex** :
- 3. Child Name :
- a) If Registered Mention the Child Name.
- **b)** If Child Name not included a separate form to be filled by the Father and Mother of the child
- 4. Name of the Father :
- 5. Name of the Mother :
- 6. Place of Birth :

(Tick the appropriate entry **a**, **b**, **c** below and give the name of the Hospital/Institute or the Address of the House where the **Birth** took place. If other place gives location)

- a) Hospital/Institution Name:
- b) House Address :
- c) Other place :
- 7. No. Of Copies Required :
- 8. a) Do you want the Birth Certificate by Courier- Yes / No
 - b) If Yes give Name and Address with Pin Code

Name & address, (Signature of the Applicant)

Telephone No:

Note: - Birth certificate will be issued subject to entry found Registered in **BIRTH RECORDS-C&DMA/PANCHYATS**.