APPLICATION FORM (BIRTH CERTIFICATE) ଜନ୍ମ ପ୍ରମାଣପତ୍ର ନିମନ୍ତେ ଦରଖାସ୍ତ

To,	The Registrar o	of Births & 1	Deaths and Ex	xecutive Officer,	N.A.C.	Navagarh			
Sub :-	· ISSUE OF BIRTH CERTIFICATE								
Sir,									
Section	I am submitt $n - 12/17$ (ing herewi	th the follo	owing particula	ers for es)	issue of	Birth	Certificate	under
1.	Name of the C ଶିଶୁର ନାମ	hild in full	(Capital letter	·) :-					
2.	Name of the Fa ପିତାଙ୍କ ନାମ	ther :-							
3.	Name of the Mo ମାତାଙ୍କ ନାମ	other :-							
4.	Date of Birth : ଜନ୍ମ ତାରିଖ	<u>.</u>							
5.	Place of Birth: ଜନ୍ମସ୍ଥାନ	-							
6.	Sex of Child :- ଲିଙ୍ଗ	-							
	Permanent Addr ସ୍ଥାୟୀ ଠିକଣା			Dist					
	Place:	• • • • • • • • • • • • • • • • • • • •			Full S	Sig. of Fat	her/Mot	ther/Guardia	ın
	Date:			ଦ୍ୱ	ରଖାସ୍ତକାଟ	ଧୀଙ୍କ ସଂପୂ	ର୍ଣ୍ଣ ସ୍ୱାକ୍ଷ	ର ଓ ସ୍ଥାୟୀ	ଠିକଣା
				Perm	anent Ac	ddress :- A	۸t		
				P.O.			. P.S		
				Dist.	• • • • • • •		.State .		
	Name of Child o ଶିଶୁରନାମ ଥରେ ୧				।ଯାଇପାରି ⁽	ବ ନାହିଁ ।			
9			For Office	Use Only	7-				
Registration No.		I	Date	Volum	ne No.		,	Vear	
Chalan No		Date		Receipt Book N	lo.	Rece	ipt Boo	k No.	
Receipt	No	Date _	*	fees realized	Rs		Rupees		
	1 ^	23.13.7							