



Puri Municipality

APPLICATION FORM (BIRTH)

To

The Registrar of Birth and Death and
Health Officer,
Puri Municipality,
Puri.

Sub: Issue of BIRTH CERTIFICATE.

Madam / Sir,

I submit herewith the following particulars for issue of Birth Certificate on payment.

1. Name of the Child (in full) : _____
(in Capital Letter)

2. Name of Father : _____

3. Name of Mother : _____

4. Place of Birth : _____

5. Date of Birth

6. Sex : Male Female

7. Permanent Address of Parents : _____

Signature of Father / Mother

For Office Use

Regd. No : _____ Date : _____ Vol.No: _____

Challan No : _____ Date _____

****NB** : Name of the child once recorded can not be changed.