

APPLICATION FOR BIRTH / DEATH CERTIFICATE

Name_____

Address_____

Date_____

To,

The Register of Birth and Deaths

Sub: Application for Birth / Death Certificate

Sir,

I shri. / Smt. _____

Hereby apply for Birth / Death certificate of

Who was born / died on _____ at _____

End registered in your office under No. _____ dated _____

Your's faithfully,

(Signature)