## **OFFICE OF THE CANTT. BOARD SAUGOR**

To,

Registrar Birth/ Death Registration, And Chief Executive Officer Cantonment Board Saugor.

## SUB:- Application form for Birth Certificate.

| 1                                      | Name of Can/Da             | Male/Female                                       |    |
|----------------------------------------|----------------------------|---------------------------------------------------|----|
| 1.                                     |                            | ghterMale/Female                                  |    |
| 2.                                     | Boy & Girl Aadhar Card No. |                                                   |    |
| 3.                                     |                            |                                                   |    |
| 4.                                     |                            |                                                   |    |
| 5.                                     | grant the second of        | ••••••                                            |    |
| 6.                                     | Father's Aadhar Card No.   |                                                   |    |
| 7.                                     | Mother's Name.             |                                                   |    |
| 8.                                     | Mother's Aadhar Card No.   |                                                   |    |
| 9.                                     | Residence                  |                                                   |    |
| 10.                                    | 0. Mobile No               |                                                   |    |
|                                        |                            |                                                   |    |
|                                        |                            | Your faithfully                                   |    |
|                                        |                            | Nama                                              |    |
|                                        |                            | Name  For Office Use Only                         | •  |
| ъ.                                     |                            |                                                   |    |
| Birth is registered at registration No |                            |                                                   |    |
|                                        |                            | ate is required by the applicant Fee Rs/- for bir |    |
| cer                                    | tificate is depos          | ed vide Receipt NoDated                           |    |
|                                        |                            | be prepared under section 12/17 of Birth and Dea  | th |
| Re                                     | gistration Act and         | submitted for signature.                          |    |
|                                        | जी महोदय                   |                                                   |    |
| उपप                                    | जा महादय                   |                                                   |    |
| फा                                     | र्म फीस                    |                                                   |    |
| सा                                     | र्टिफिकेट फीस              | Chief Executive Registrar                         |    |
| का                                     | पिंग फीस                   | And                                               |    |
| लेट                                    | : फीस                      | For Registrar Birth Death Registration            |    |
|                                        | रोटल -                     |                                                   |    |

Signature Date / /2020