

APPLICATION FOR BIRTH/DEATH CERTIFICATE

Name : _____

Address: _____

Date: _____

To,

The Registrar of Births & Death,

Sub: Application for Birth/ Death certificate

Sir/Madam,

I, Shri / Smt. _____

hereby apply for birth / death certificate _____

who was born / died on _____ at _____

Yours Faithfully

(Signature)