For office use only:

Paid Rs. Date

Remarks of dealing clerk with initials

APPLICATION FOR BIRTH / DEATH CERTIFICATE

Cont. No Applicant Name: Date: Address: H.No:

To,

The Registrar of Births & Deaths,

Village Panchayat Goa. Number of Copies:

Sub: Request to issue Birth / Death Certificate.

Sir / Madam,

It is kindly requested to issue Birth / Death certificate, of the person whose details are furnished below:-

- 1. Name:
- 2. Fathers Name:
- 3. Mothers Name:
- 4. Date of Birth / Death: Registration No
- 5. Place of Birth / Death Registered at:

Yours faithfully

Name & Signature: