

APPLICATION FOR BIRTH / DEATH CERTIFICATE

Name of the Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Date: \_\_\_\_\_

Mob. No. \_\_\_\_\_

To,  
The Registrar of Births & Deaths,  
V. P. Usgao Ganjem, Ponda Goa.

**Sub: Request to issue Birth / Death Certificate.**

Sir / Madam,

It is kindly requested to issue Birth / Death certificate, the details of which are furnished below

1. Name: \_\_\_\_\_
2. Fathers Name: \_\_\_\_\_
3. Mothers Name: \_\_\_\_\_
4. Date of Birth / Death: \_\_\_\_\_
5. Place of Birth Death: \_\_\_\_\_

**(Optional)**

6. Registration No.: \_\_\_\_\_
7. Place of Registration: \_\_\_\_\_
8. Date of Registration: \_\_\_\_\_

Yours Faithfully

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

**For Office use only:**

Paid Rs. \_\_\_\_\_ vide receipt No. \_\_\_\_\_ Date \_\_\_\_\_

Remarks of dealing clerk \_\_\_\_\_