APPLICATION FOR BIRTH / DEATH CERTIFICATE

Mob. No	Name of the Applicant:
Date:	
To, The Registrar of Births & Deaths, V. P. Sanvordem, Sanquem- Goa. Sub: Request to issue Birth / Death Certificate. Sir / Madam, It is kindly requested to issue Birth / Death certificate, the details of which are furbished 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: Name:	Date:
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Name: For Office use only: Paid Rsvide receipt NoDate	Signature:
Paid Rsvide receipt NoDate	
	For Office use only:
Remarks of dealing clerk	Paid Rsvide receipt NoDate
	Remarks of dealing clerk