

(English Version)



FORM NO.- 7 / 8

GOVERNMENT OF ODISHA

DEPARTMENT OF HEALTH AND FAMILY WELFARE
TALCHER MUNICIPALITY

CERTIFICATE OF BIRTH

*Issued under section 12/17 of the Registration of Births and Deaths Act, 1969 and rules of Odisha
Births and Deaths, Rule 2001.*

This is to certify that the following information has been taken from the original record of birth which is in the
register for Talcher Municipality of Tahasil TALCHER
of District ANGUL of State of ODISHA

Date of Birth 02/03/2016

Sex MALE

Name SHUBHAM PRADHAN

Name of Father SUBRAT KUMAR PRADHAN

Name of Mother SANGITA PRADHAN

Date Of Registration 02/03/2016

Permanent Address BADASINGHADA, NS NAGAR

BHARATPUR, VIKRAMPUR, ANGUL, ODISHA,

INDIA

Place of Birth SANJIBANI CLINIC, TALCHER

Registration No. 383/2016



Signature valid

Digitally signed by ATASI
PARIDA
Date: 2019.03.30 15:48:14
IST
Reason: Birth Application
Location: TALCHER

Note: It is a digitally signed electronically generated certificate and therefore needs no ink-signed signature.

This certificate is issued as per section 4, 5 & 6 of Information Technology Act 2000 and its subsequent amendments in 2008. For any query, please visit <https://www.ulbodisha.gov.in>. Tampering of this certificate will attract penal action.

Date :

30/03/2019

Registrar
Births & Deaths

TALCHER MUNICIPALITY