

(English Version)

FORM NO-7/8



ISSUE NO : 1325/2021

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 following information has been taken from the original records of birth which is in the

register for Talcher Municipality of Tahasil TALCHER  
of District ANGUL of State ODISHA

Date of Birth.....16/04/2021

Permanent Address.....CHALAGARH, GHANTAPADA.

Sex.....MALE

COLLERY, ANGUL, ODISHA, INDIA

Name.....TRIDEV SHAKTI THAMB

Name of Father.....TRISHULA SHAKTI THAMB

Place of Birth.....SUBDIVISIONAL HOSPITAL,

Name of Mother.....MANISA SINGH

TALCHER

Date Of Registration.....30/04/2021

Registration No.....1170/2021



Date :08/10/2021

Signature valid

Digitally signed by MANITA RASHMIREKHA  
Date: 2021.10.08 16:33:37  
Reason: B Application  
Location: TALCHER

MISS RASHMIREKHA AAMANTA  
Issuing Authority  
Registrar, Births & Deaths  
TALCHER MUNICIPALITY

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 or verification, please visit <https://www.ubodisha.gov.in>. Tampering of this certificate will attract penal action.