

(English Version)



FORM NO-7/8

GOVERNMENT OF ODISHA
DEPARTMENT OF HEALTH AND FAMILY WELFARE
Kendrapara 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 **Kendrapara Municipality** of Tahasil **KENDRAPARA** of District **KENDRAPARA** of State **ODISHA**

Date of Birth.....24/07/2018.....

Permanent Address.....AT-CHADAIGUAN.....

Sex.....MALE.....

PO-MAHAKALPARA, PS-MAHAKALPARA.....

Name.....DIBYANANDA SAHANI.....

KENDRAPARA, ODISHA, INDIA.....

Name of Father.....MANAS KUMAR SAHANI.....

Place of Birth.....HEALTH CARE HOSPITAL.....

Name of Mother.....JAYANTI SAHANI.....

KENDRAPARA.....

Date Of Registration.....13/08/2018.....

Registration No.....6563/2018.....



Signature valid

Digitally signed by
BIRENDRA KUMAR DASH
Date: 2019.07.26 15:43:27
IST
Reason: Birth Application
Location: KENDRAPARA

DR BIRENDRA KUMAR DASH

Issuing Authority

Registrar, Births & Deaths
KENDRAPARA MUNICIPALITY

Date :26/07/2019

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 2008 and its subsequent amendments in 2008. For any query or verification, please visit <https://www.ulbodisha.gov.in>. Tampering of this certificate will attract penal action.