

(English Version)



FORM NO-5
ISSUE NO : 1115/2023



GOVERNMENT OF ODISHA

DEPARTMENT OF HEALTH AND FAMILY WELFARE

Berhampur Municipal Corporation

CERTIFICATE OF BIRTH

*Issued under Section 12/17 of the Registration of Births and Deaths Act, 1969 and 8/13 Rule of the Odisha
Registration of 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 **Berhampur Municipal Corporation** of Tahasil **BERHAMPUR**
of District **GANJAM** of State **ODISHA**

NAME: NAVNEET SASMAL

SEX: MALE

DATE OF BIRTH:
03/01/2019

PLACE OF BIRTH:
AMIT HOSPITAL, BERHAMPUR

NAME OF MOTHER:
PINKI BASANTIA

NAME OF FATHER:
PRASANNA SASMAL

MOTHER'S ID PROOF NO:

FATHER'S ID PROOF NO:

ADDRESS OF PARENT AT THE TIME OF CHILD
BIRTH: AT/PO-DERA COLLIERY, PS-COLLERY, ANGUL,
ANGUL, ODISHA, INDIA, 759103

PERMANENT ADDRESS :
AT/PO-DERA COLLIERY, PS-COLLERY, ANGUL, ANGUL,
ODISHA, INDIA, 759103

REGISTRATION NO:
765/2019

REGISTRATION DATE:
12/01/2019

UBRN NO:
21UB354-0005-000765-2019

DATE OF ISSUE:
11/01/2023



Signature valid

Digitally signed by MANAS
RANJAN PANDA
Date: 2023.01.11 15:55:29 IST
Reason: Birth Certificate
Location: BERHAMPUR

Dr Manas Ranjan Panda
Issuing Authority
Registrar, Births & Deaths
HEALTH OFFICER

THIS IS A COMPUTER GENERATED CERTIFICATE WHICH CONTAINS FASCIMILE SIGNATURE OF THE ISSUING AUTHORITY.

It is a digitally signed electronically generated certificate and therefore needs no ink-signed signature, stamp or seal. 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.birtheath.odisha.gov.in> Tampering of this certificate will attract penal action.