



**CHANDIGARH ADMINISTRATION  
REGISTRAR BIRTHS & DEATHS**



**Application for Issue of Birth Certificate(s)**

**FOR OFFICE USE ONLY**

To

The Registrar,  
Births and Deaths,  
U.T., Chandigarh.

Sir,

Total Amount \_\_\_\_\_

Number of Copies \_\_\_\_\_

Receipt Number \_\_\_\_\_

Dated : \_\_\_\_/\_\_\_\_/\_\_\_\_

Kindly issue me the Birth Certificate(s) as per details given below :

1. Date of Birth (dd/mmm/yyyy): \_\_\_\_/\_\_\_\_/\_\_\_\_
2. Sex : Male  Female  (Tick  one)
3. Place of Birth (Complete Address) : \_\_\_\_\_  
\_\_\_\_\_
4. Father's Name: \_\_\_\_\_
5. Mother's Name: \_\_\_\_\_
6. Grand Father's Name: \_\_\_\_\_
7. Permanent Address at the time of admission in Hospital/Nursing Home:  
\_\_\_\_\_
8. Relation of Applicant with Child (Father/Mother/Relative):



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9. Registration Number (if applicant knows) \_\_\_\_\_
10. Registration Date (if applicant knows) \_\_\_\_\_
11. Name of Child (with application on bond Paper) \_\_\_\_\_

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Instructions to Dealing Hand in case of any correction filed by the applicant :

Corrected Particulars with the date of correction:

Child Name (if any): \_\_\_\_\_

Name of Father: \_\_\_\_\_

Name of Mother: \_\_\_\_\_

Sex: \_\_\_\_\_ (DOC: \_\_\_/\_\_\_/\_\_\_)

Date of Birth: \_\_\_/\_\_\_/\_\_\_ (DOC: \_\_\_/\_\_\_/\_\_\_)

Place of Birth: \_\_\_\_\_ (DOC: \_\_\_/\_\_\_/\_\_\_)

DOC - Date of Correction

Signature of Receiver with Date of receiving \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_