CUTTACK MUNICIPAL CORPORATION

BIRTH APPLICATION FORM

To,
THE REGISTRAR, BIRTH & DEATHS, CUTTACK MUNICIPAL CORPORATION
Sir,

	Date of Birth		2. Place of Birth	
3.	Name of the child (in BLOCK letters) Sex			
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7.				
3.	Permanent address			
 €.	Full Name of the applicant			
	Address			
10.	Relation to the child			
11.	Registration No. & Date			
			Full Signature	of the Applican
		FOR OFFICIA	AL USE ONLY Da	te
	FEES REALISED UNDER RULE	TREASURY CHALLAN No.	DATE	AMOUNT in Rs.
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