

From: _____

Address : _____

Dated : _____

Ph.: No. _____

To,
The Chief Registrar of Birth & Death

Sub: Correction of Names / Address

Sir,

The event of Birth / Death of my son/daughter/sister/father/mother / _____

born / expired on _____ is registered in your office under
Registration No. B/ _____ dated _____

There were some mistakes occurred at the time of registration of event which are to be corrected as under:

FILL ONLY THE COLUMNS WHICH ARE TO BE CORRECTED

Sr. No.	Name Recorded	Proposed Correction (in capital letters)
1.	Name of Child/Deceased	
2.	Name of Father	
3.	Name of Mother	
4.	Name of Gandfather	
5.	Name of Gandmother	
6.	Address	

I hereby submit the following documents in support of correction.

1. CIVIL / CHURCH MARRIAGE CERTIFICATE
2. AFFIDAVIT
3. RATION CARD
4. BIRTH CERTIFICATE OF FATHER / MOTHER
5. EDUCATIONAL CERTIFICATE & DOCTOR'S CERTIFICATE

(Signature of Applicant)