



**AGARTALA MUNICIPAL CORPORATION**  
**CITY CENTRE – PARADISE CHOWMUHANI, AGARTALA**  
**TRIPURA-799001**

**FORM OF APPLICATION FOR ISSUING OF BIRTH REGISTRATION CERTIFICATE**  
(Downloaded from the official site of Agartala Municipal Corporation)

1. **Name of the Child**  
(in block letter) :

2. Sex :

3. Place of birth:

4. Date of birth :

5. Name of parents

(a) Father's name:

(b) Mother's name:

6. Nationality:

7. Permanent address:

8. Present Address:

Signature of the applicant  
(Father/mother)

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**List of documents to be enclosed duly attested by the Gazetted officer**

1. Discharge certificate from the Hospital/Nursing Home with Acknowledgement copy.
2. Certificate of birth from the Recognized medical Practitioner along affidavit from the Executive Magistrate (in case of Home delivery)
3. copy of the citizenship certificate/Ration card/Voter I Card/MNIC/Service identity card of Govt. service of the parents.

**(FOR OFFICIAL USE ONLY)**

Scrutinized the enclosed documents with filled in column above and found correct

Signature of the receiving clerk.

1. Prescribed fee deposited.

a. Amount \_\_\_\_\_

b. Chalan receipt No. \_\_\_\_\_

c. Date \_\_\_\_\_

Rechecked & signed by the Dealing Assistant

2. Recommendation for the Registration and issuing certificate ... Yes/No.

4. Registration No \_\_\_\_\_ dated \_\_\_\_\_ Block No. \_\_\_\_\_ and the certificate may be signed.

**Section-incharge**

**P.H. Section-AMC**

**Agartala Municipal Corporation**

**ORDER OF THE ISSUING AUTHORITY**  
**Health Officer (Registrar Birth & Death)**  
**Agartala Municipal Corporation**

**(Rs. 5/- to be paid during submission of this Application Form)**

2. Certificate of birth from the medical Practitioner (in case of Home delivery)
3. Affidant from 1<sup>st</sup> class Magistrate or Notary public in case of information submitted after 30days from date of Birth (in case of home deliver)
4. Permission of the Sub-Divisional Magistrate in case of information submitted after 01(one) year from the date of Birth (in case of home delivery)