



Price: ` 1

APPLICATION FOR NON AVAILABILITY CERTIFICATE FOR BIRTH

From _____ To _____
Name: The Registrar of Birth and Deaths,
Address: Registration Unit ID. _____,
Telephone No: District Name _____,
CDMA Department, Andhra Pradesh.

Sir,

Sub: - Request of Non-availability for birth Certificate –Reg.

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I, _____ S/o./W/o. _____

Aged about _____ years working as _____

(Designation & office Address) Residing at H.No _____

_____ (Complete Door no. & House Address).

I declare that my wife _____ Delivered Male/Female child

in _____ (Place of Birth)

on _____ (Date of Birth).

I hereby declare that the above-mentioned information is correct up to my knowledge and I bear the responsibility for the correctness of the above-mentioned.

Documents to be enclosed:

Signature of the Applicant

1. Application Form