A close-up of a bar code

AI-generated content may be incorrect.

{certificateNumber}

**Form 5**

**GOVERNMENT OF MAHARASHTRA**

**DEPARTMENT OF HEALTH**

**RURAL HOSPITAL {taluka}**

**BIRTH CERTIFICATE**

जन्म व मृत्यु नोंदणी अधिनियम, 1969 च्या कलम 12/17 आणि महाराष्ट्र जन्म आणि मृत्यु नोंदणी नियम, 2000 चे नियम 8/13 अन्वये दे ण्यात आले आहे. (ISSUED UNDER SECTION 12/17 OF THE REGISTRATION OF BIRTHS & DEATHS ACT, 1969 AND RULE 8/13 OF THE MAHARASHTRA REGISTRATION OF BIRTHS & DEATHS RULES 2000)

प्रमाणित करण्यात येत आहे की, खालील माहिती जन्माच्या मूळ अभिलेखाच्या नोंदवहीतून घेण्यात आली आहे, जी की ग्रामिण रुग्णालय तासगाव, तालुका तासगाव, जिल्हा सांगली, महाराष्ट्र राज्या, भारत च्या नोंदवहीत उल्लेख आहे.

THIS IS TO CERTIFY THAT THE FOLLOWING INFORMATION HAS BEEN TAKEN FROM THE ORIGINAL RECORD OF BIRTH WHICH IS THE REGISTER FOR RURAL HOSPITAL **{taluka}** OF TAHSIL/BLOCK **{taluka}** OF DISTRICT **{district}** OF STATE/UNION TERRITORY MAHARASHTRA, INDIA.

|  |  |
| --- | --- |
| **NAME: {fullName}** | **SEX: {gender}** |
| **DATE OF BIRTH: {dob}** | **PLACE OF BIRTH: {placeOfBirth}** |
| **NAME OF MOTHER:**  {motherName} | **NAME OF FATHER**:  {fatherName} |
| **ADDRESS OF PARENT**:  {address} | **PERMANENT ADDRESS:**  {permanentAddress} |
| **REGISTRATION NUMBER**:  {certificateNumber} | **DATE OF REGISTRATION**:  {date} |

**HOSPITAL DETAILS**: {hospitalName}, {hospitalAddress}, {hospitalContact}

Signature of Parents

**{fatherName}**

**{motherName}**

Signature Valid

Digitally Signed By

{authorityName}

Date: {date}

**District Officer**

**{district}**

**A green check mark on a black background

AI-generated content may be incorrect.**

**Place: {taluka}**

**Date: {date}** (with the seal of office)