

(English Version)



FORM NO-5
ISSUE NO : 5387/2025



GOVERNMENT OF ODISHA

DEPARTMENT OF HEALTH AND FAMILY WELFARE

Balasore Municipal Council

CERTIFICATE OF BIRTH

*Issued under Section 12/17 of the Registration of Births and Deaths Act, 1969 and 8/13 Rule of the Odisha
Registration of Births and Deaths, Rule 2001*

This is to certify that following information has been taken from the original records of birth which is in the
register for **Balasore Municipal Council** of Tahasil **BALASORE**
of District **BALASORE** of State **ODISHA**

NAME: SAMBIT NAYAK

SEX: MALE

DATE OF BIRTH:
02/07/2024

PLACE OF BIRTH:
MEDICAL COLLEGE AND HOSPITAL, BALASORE

NAME OF MOTHER:
MAMATA NAYAK

NAME OF FATHER:
BHUPAL CHANDRA NAYAK

MOTHER'S ID PROOF NO:

FATHER'S ID PROOF NO:

ADDRESS OF PARENT AT THE TIME OF CHILD
BIRTH: BHANUPUR, JALESWAR, BALASORE, ODISHA,
INDIA

PERMANENT ADDRESS :
BHANUPUR, JALESWAR, BALASORE, ODISHA, INDIA

REGISTRATION NO:
7635/2024

REGISTRATION DATE:
21/07/2024

UBRN NO:
21UB346-0008-007635-2024

DATE OF ISSUE:
29/03/2025



Signature valid

Digitally Signed
Name: Sapan Kumar Mohanty
Date: 29-Mar-2025 17:35:12
Reason: Birth Certificate
Location: BALASORE

Dr Sapan Kumar Mohanty
issuing Authority
Registrar, Births & Deaths
HEALTH OFFICER

THIS IS A COMPUTER GENERATED CERTIFICATE WHICH CONTAINS FACSIMILE SIGNATURE OF THE ISSUING AUTHORITY.

It is a digitally signed electronically generated certificate and therefore needs no ink-signed signature, stamp or seal. This certificate is issued as per section 4,5 & 6 of information technology Act 2000 and it's subsequent amendments in 2008. For any query or verification, please visit <https://www.birtheath.odisha.gov.in> Tampering of this certificate will attract penal action.