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Form-5

GOVERNMENT OF WEST BENGAL  
DEPARTMENT OF HEALTH AND FAMILY WELFARE  
RURAL HOSPITAL BELDANGA



BIRTH CERTIFICATE

(ISSUED UNDER SECTION 12/17 OF THE REGISTRATION OF BIRTHS & DEATHS ACT, 1969 AND RULE 8/13 OF THE WEST BENGAL REGISTRATION OF BIRTHS & DEATHS RULES 2000.)

THIS IS TO CERTIFY THAT THE FOLLOWING INFORMATION HAS BEEN TAKEN FROM THE ORIGINAL RECORD OF BIRTH WHICH IS THE REGISTER FOR RURAL HOSPITAL BELDANGA OF BLOCK/MUNICIPALITY MUNICIPALITY BELDANGA OF DISTRICT MURSHIDABAD OF STATE WEST BENGAL, INDIA.

NAME :	HABIBA KHATUN	GENDER :	FEMALE
DATE OF BIRTH :	08/11/2023	PLACE OF BIRTH :	RURAL HOSPITAL BELDANGA, MUNICIPALITY BELDANGA, MURSHIDABAD, WEST BENGAL
NAME OF MOTHER :	HADISHA BIBI	NAME OF FATHER :	MUSTAKIM SK
MOTHER'S IDENTITY PROOF :	AADHAAR- XXXXXXXXXX2546	FATHER'S IDENTITY PROOF :	AADHAAR- XXXXXXXXX4917
PRESENT ADDRESS OF MOTHER AT THE TIME BIRTH OF THE CHILD :	STREET/LANE:- MAKRAMPUR MOLLAPARA,LOCALITY:- BISHANNAGAR,VILLAGE/TOWN:- BISHANNAGAR,BELDANGA - I BLOCK,DIST:- MURSHIDABAD,WEST BENGAL-742133		
PERMANENT ADDRESS OF MOTHER :	STREET/LANE:- MAKRAMPUR MOLLAPARA,LOCALITY:- BISHANNAGAR,VILLAGE/TOWN:- BISHANNAGAR,BELDANGA - I BLOCK,DIST:- MURSHIDABAD,WEST BENGAL-742133		
CERTIFICATE NO :	B/2023/1494767	DATE OF REGISTRATION :	20/12/2023
S-UHID :	89240903223385	REMARKS (IF ANY) :	
DATE OF ISSUE :	20/12/2023	UDIN :	---
UPDATED ON :	2023-12-19 21:14:39	ISSUING AUTHORITY :	



REGISTRAR (BIRTH & DEATH)  
RURAL HOSPITAL BELDANGA

"THIS IS A COMPUTER GENERATED CERTIFICATE."  
THE GOVT.OF INDIA VIDE CIRCULAR NO. 1 / 12 / 2014 - VS(CRS) DATED 27 - JULY - 2015  
HAS APPROVED THIS CERTIFICATE AS A VALID LEGAL DOCUMENT FOR ALL OFFICIAL PURPOSES

"ENSURE REGISTRATION OF EVERY BIRTH AND DEATH"