

BEFORE THE REGISTRAR OF BIRTHS & DEATHS \_\_\_\_\_

A F F I D A V I T

I, \_\_\_\_\_ S/o, D/o \_\_\_\_\_ Aged:  
years, Occu: \_\_\_\_\_ R/o \_\_\_\_\_  
\_\_\_\_\_ do hereby solemnly affirm and state on oath as follows:-

1. That I born at \_\_\_\_\_ Hospital \_\_\_\_\_  
on \_\_\_\_\_.
2. That the birth event has been registered in the Birth and Death Record of  
\_\_\_\_\_ Municipal Corporation.
3. That my father name " \_\_\_\_\_ " was recorded in the Hospital  
Records. But, in the Births & Death Records of \_\_\_\_\_ Municipal  
Corporation my father's name was recorded as " \_\_\_\_\_ " which is  
incorrect. I submit that my father name is " \_\_\_\_\_ " which is true  
and correct.
4. Hence, I request your goodself to kindly correct my father's name as  
" \_\_\_\_\_ " in the Birth & Death Records and issue a Birth Certificate.

INCORRECT NAME

CORRECT NAME

The facts referred to above are true and correct to the best of my knowledge  
and belief.

DEPONENT

VERIFICATION:- Sworn and signed before me by the deponent admitting the  
contents of this affidavit on \_\_\_\_\_ at \_\_\_\_\_.

NOTARY