



फॉर्म संख्या / Form No. 5 राष्ट्रीय राजधानी क्षेत्र, दिल्ली सरकार Govt. of National Capital Territory of Delhi उत्तरी दिल्ली नगर निगम NORTH DELHI MUNICIPAL CORPORATION जन्म प्रमाण पत्र / Birth Certificate



(Issued under section 17 of the Registration of Birth and Death Act, 1969 and 8/13 of Delhi Registration of Birth Rule,1999)

This is to certify that the following information has been taken from the original record of BIRTH which is the register for North Delhi Municipal Corporation of CIVIL LINE ZONE of N.C.T. Delhi

नाम / Name SOHAM JAIN

लिंग / Gender MALE

जन्म की तिथि / Date Of Birth 14-10-20<mark>0</mark>6

जन्म का स्थान / Place Of Birth GAUTAM NURSING HOME

पंजीकरण की तिथि / Date Of Registration 06-11-2006

पंजीकरण संख्या / Registration No MCDOLIR-2206-002319906

पुरानी पंजीकरण संख्या / Old Registration No MCDOLR06249929

माता का नाम / Name of Mother ANTIMA JAIN

पिता का नाम / Name of Father VIKAS JAIN

वर्तमान / जन्म के समय पता

Present / Address at the time of Birth)

स्थाई पता / Permanent Address INDIA

छपाई की तिथि / Print Date 09-02-2022



Note: This certificate is system generated and does not require any seal/signature in original. The authenticity of this certificate can be verified at mcdonline.nic.in

INDIA

प्रत्येक जन्म एवं मृत्यु का पंजीकरण सुनिश्चित करे ENSURE REGISTRATION OF EVERY BIRTH & DEATH