



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



0122-3011248797

(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 Municipal Corporation Of Delhi of CITY S.P. ZONE of N.C.T. Delhi

नाम / Name	SUYAKKSH MALHOTRA
लिंग / Gender	MALE
जन्म की तिथि / Date Of Birth	03-11-2022
जन्म का स्थान / Place Of Birth	SANT PARMANAD HOSPITAL 18, SHAM NATH MARG, CIVIL LINES, DELHI DELHI CIVIL LINES NEW DELHI DELHI INDIA 110054
पंजीकरण की तिथि / Date Of Registration	05-11-2022
पंजीकरण संख्या / Registration No	MCDOLIR-0122-0511149569
माता का नाम / Name of Mother	KANIKA MALHOTRA
पिता का नाम / Name of Father	CHETAN MALHOTRA
वर्तमान / जन्म के समय पता Present / Address at the time of Birth)	165, HAKIKAT NAGAR, NORTH WEST DELHI INDIA 110009
स्थायी पता / Permanent Address	165, HAKIKAT NAGAR, NORTH WEST DELHI INDIA 110009
छपाई की तिथि / Print Date	30-11-2022



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

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