



THE REGISTRATION OF PERSONS (BIRTHS AND DEATHS)  
REGULATIONS, 2015

**APPLICATION FOR A CERTIFIED COPY OF ENTRY IN THE  
REGISTER OF BIRTH AND DEATH**

I hereby apply for a certified copy of an entry in the birth or death\* Register in respect of  
.....(State name) registered on (dd/mm/yy) .....

I have paid the prescribed fee for a copy of an entry (proof of payment is attached).

Dated (dd/mm/yy) .....

\* delete whichever is not applicable.

signed .....

Applicant