

9. Reason for requesting translation

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10. Preferable language for translation

(Please tick as applicable)

- English - 2000/=

Rs. _____ is paid to Department for Registrations of Persons on the date of _____, and the payment receipt number is _____.

Note: Please attach the photo copy of the payment receipt.

I accept that the above information is true and correct to the best of my knowledge and belief.

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Signature

.....
Date

Telephone Number

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➤ **Operation Branch**

Documents provided by applicant/receiver.

1. Letter from Applicant (If She/he not Presented to collect the Translation)
2. Birth Certificate photo copy
(If applicant's blood relation is presented to receive the translation)
3. Marriage Certificate photo copy
(If applicant's spouse is presented to receive the translation)

Other documents if any

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Note:

➤ **Numbering Branch**

Checked & Original Copy Received

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