

UNDER TAKING

I _____ S/o, W/o, D/o _____

Having CNIC NO. _____ Resident of _____

do hereby solemnly affirm and state on Oath that all information/particulars supplied/provided by myself for registration of Birth/Death and Nikah of my _____ is correct according to my best knowledge & belief and no fact (s) or information is cancelled.

Furthermore, I am entirely responsible /accountable and shall bear the consequences in Result of any wrong/false information/misrepresentation/ misbelief provided bt me in connection with the said registration of Birth/Death/Nikha in Cantonment Board Kharian.

Under Taker

Witness: 1 C.B Elected Member

Name & Sig: _____

Stamp

Signatures _____

Name _____

Cell No. _____

Dated _____

Witness: 2. _____

Name _____

Cell No. _____