



**AFFIDAVIT TO BE GIVEN BY THE PARENTS TO APPLY FOR OCI REISSUANCE / PIO ENDORSEMENT
FOR MINOR CHILD**

I/We, _____ (Mother) &
_____ (Father) of

(Name of the applicant/minor child) residing at _____ (House No)
_____ (Street) _____ (City)
_____ (State) _____ (Post Code) do hereby declare that I/we have no

objection to the reissuance of OCI / PIO endorsement for our child.

Name of the child : _____

Date of Birth : ____/____/____

Place of Birth : _____

Mother _____
(Name) (Signature)

Father _____
(Name) (Signature)

Date:

Place: