

Court Fee Stamp as required

**APPLICATION FORM FOR PERMISSION DELAYED DEATH REGISTRATION**

(Fields marked \* are mandatory)

<b>Name of Applicant*</b>	<b>:-</b> _____	<b>Name of Spouse</b>	<b>:-</b> _____
<b>Gender</b>	<b>:-</b> _____	<b>Date Of Birth</b>	<b>:-</b> _____
<b>Name of the Deceased*</b>	<b>:-</b> _____	<b>Relationship of the Applicant with the Deceased Person*</b>	<b>:-</b> _____
<b>Gender*</b>	<b>:-</b> _____	<b>Date of Death*</b>	<b>:-</b> _____
<b>PHC *</b>	<b>:-</b> _____	<b>Place of Death*</b>	<b>:-</b> _____

**Address of the Applicant :**

<b>District*</b>	<b>:-</b> _____	<b>Sub Division*</b>	<b>:-</b> _____
<b>Revenue Circle*</b>	<b>:-</b> _____	<b>Village / Town*</b>	<b>:-</b> _____
<b>GP / Ward</b>	<b>:-</b> _____	<b>Mouza</b>	<b>:-</b> _____
<b>Post Office</b>	<b>:-</b> _____	<b>Police Station*</b>	<b>:-</b> _____
<b>Pin No.</b>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
<b>Phone No.</b>	<input type="text"/> 91 <input type="text"/> <input type="text"/>	<b>Mob. No.</b>	<input type="text"/> 91 <input type="text"/>
	(STD Code without 0 prefix + Phone No.)		(10 Digit Mobile No.)

**e-mail ID,if any :-** \_\_\_\_\_

**DECLARATION**

All the information furnished above are correct to the best of my knowledge and belief.

Date :- \_\_\_\_\_ Signature of Applicant

**Supporting Documents Required**

\* In case, each supporting document has multiple pages, please convert the same to a single document, with a file size of less than 2MB(2048 kb) and upload.

- 1 . Gaon Burah's Certificate/Ward Commissioner's Certificate in respect of Municipality/Town Committee areas
- 2 . Doctor's Certificate regarding Death
- 3 . Affidavit duly signed by the Magistrate if delayed for more than one year
- 4 . Other Documents (if any)