## **APPLICATION FORM FOR DEATH CERTIFICATE**

To,

The Registrar of Births & Deaths & Executive Officer, N.A.C.,Patnagarh.



Sub:- Issue of Death Certificate U/s-17of the Registration of Birth & Death Act.1969 read with Odisha Births & Deaths Registration Rule-2001.

## Sir/Madam,

I am submitting herewith the following particulars for issue of Death Certificate U/s-17of the Registration of Birth & Death Act.1969 read with Odisha Births & Deaths Registration Rule-2001.

## (To be filled in Block Letters)

1. Name of the deceased (In fu	ull):	
2. Name of Fatrher/Husband		
4. Place of Death		
5. Date of Death		
6. Sex	: Male Female	
7. Permanent Address of Deceased -Village		
	DistState	
8. Name & Address of the Applicant -Name		
Village	P.S	
Dist	State	
9. Contact Number		

Full signature of the Applicant (Father/Mother / Guardian)

## FOR OFFICE USE ONLY

Regd. No	DateVol. No.	0
Received Fee Amount Rs		
Challan /Receipt No		