

# **APPLICATION FORM FOR DEATH CERTIFICATE**

To

The Register BIRTH and DEATH Bhawanipatna PHC/CHC/NAC/ Municipal Corporation.

Sub: **Issue of Death Certificate.**

Sir/Madam

I am submitting here with the following particulars for issue of Death certificate under section 12/17(.....copy/copies)

Name of the Deceased:-

(Capital letter)

Name of the Father/Husband: -

Date of Death : -

Place of Death : -

Sex of Deceased : -

Permanent Address: -

AtPo/Ps \_\_\_\_\_ Dist State \_\_\_\_\_ Pin \_\_\_\_\_  
Mob- \_\_\_\_\_

Place: \_\_\_\_\_

Date: \_\_\_\_\_

Full Signature of Father/Mother/Guardian.

Permanent Address: AtPo \_\_\_\_\_ Ps \_\_\_\_\_ Dist \_\_\_\_\_  
State Odisha \_\_\_\_\_

## **FOR OFFICE USE**

Registration no \_\_\_\_\_ Date of Registration \_\_\_\_\_ Volume no \_\_\_\_\_

Year \_\_\_\_\_ Chalan no \_\_\_\_\_ Date \_\_\_\_\_ Receipt book no \_\_\_\_\_ Receipt

No \_\_\_\_\_ Date \_\_\_\_\_ fees released, Rs \_\_\_\_\_ (Rupees \_\_\_\_\_)

)Only.

Signature of the register with official seal.