

UDAIPUR MUNICIPAL COUNCIL

Rs. 5.00



Udaipur, Gomati District, Tripura.

(Birth and Death Section)

DEATH REPORT

(FORM NO. 4)

1. Date of death :-
2. Full name of the deceased. :-
3. Name of the father / husband :-
4. Age. :-
5. Place of death. :-
6. Sex (Male / Female) :-
7. Marital status. :-
8. Occupation. :-
9. Religion. :-
10. Nationality. :-
11. Permanent residential address. :-

12. Cause of death. :-
13. Whether medically certified.
Yes / No. :-
14. Kind of medical attention
received if any. :-
15. Informants :
a) Name. :-
b) Addrees. :-
16. Citizenship certificate / reliable
testimonial on citizen of India of
the guardian should be attested. :-
17. Receipt No. Street light fees. :-

Signature / left thumb
mark of the informant.

FOR OFFICE USE ONLY

1. Fee charge for. Rs.
2. Street light fee. Rs.
3. Other fee if any. Rs.
4. Registration No.
Date.
5. Date of Delivery.

Sig. of the dealing Assitt.