FORM NO. 6

DEATH CERTIFICATE

( Issued under Section 12/17 of the Registration of Births and Deaths Act, 1969 and Rule 8/13 of the Rajasthan Registration of Births and Deaths Rules, 2000 )

This is to certify that the following information has been taken from the original record of death which is the register for (local area / local body)………………………….of tahsil / block………………………. of District……………………………… of state / Union territory ……………………………

Name/Name: ……………………………………….............. Sex ……..............................………………… 

Date of Death ………………….............. Place of death.......................………………

Name of mother………………………………………………………..............................................

Name of Father/Husband ………………………………...............................................…

Permanent address  of the deceased:

Address of the deceased at the time of death: …………………………………………………………………………………………………...

Registration No:. ……… Date of Registration …..........................

Remarks(if any)………………………..................................................................................................

Date of issue:…................................ Signature of the issuing authority

Address of the issuing authority

Muhir /Seal