

FORM - 026

_____ **MUNICIPALITY / CORPORATION**

APPLICATION FOR NON AVAILABILITY CERTIFICATE FOR DEATH

From
Name:
Address:
Telephone No:

To
The Registrar of Birth and Deaths,

Sir,

Sub: - Request of Non-availability Certificate –Reg.
Ref: - Your Endorsement Dated _____ No. _____.

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I, _____ S/o./W/o. _____

Aged about _____ years working as _____ (Designation
& office Address) Residing at H.No _____ (Complete door no)

I declare that My _____ died in _____ (Place of Birth)

on _____
(Date of Birth)

I hereby enclose the following photo copies with attestation for issuance of Non-Availability certificate.

1. Ration Card/Any other Residence Proof
2. Notarized Affidavit
3. Other Documentary Evidences to prove the place of Death
4. Burial Ground Receipt
5. In case of Medico Legal cases
 - a) FIR (b) PM Report (c) Form_2 given by concerned Police Station
6. Any other supporting documents if any please specify

Signature of the Applicant