



REVENUE DEPARTMENT, GOVT. OF NCT OF DELHI
APPLICATION FORM – DEATH REGISTRATION ORDER

APPLICANT DETAILS

1. e-DistrictRegistration Number :
(For already Registered User)

OR

2. UID (AADHAAR) No :

3. Name of Applicant : _____

4. Applicant's Relation with Deceased : _____

5. Mobile No. : e-Mail ID : _____@_____

6. Residential Address of Applicant:

House Name/No : _____	Sub-Locality : _____
Locality : _____	Village/Town : _____
Sub- division : _____	District : _____
State : _____	Country : _____
PIN Code : <input type="text"/>	

DECEASED DETAILS

7. UID (AADHAAR) No (if available) :

8. Name of Deceased : _____

9. Name of Father : _____

10. Name of Mother : _____

11. Name of Spouse : _____

12. Gender Male Female Other

Date of Death: DD MM YYYY

Deceased color
Passport Size
Photograph
Size – 5 x 4.5 (Cm.)
Or
2 x 1.75 (Inch)

13. Place of Death Address:

House Name/No : _____	Sub-Locality : _____
Locality : _____	Village/Town : _____
Sub- division : _____	District : _____
State : _____	Country : _____
PIN Code : <input type="text"/>	

14. Address of Deceased at the time of death

House Name/No : _____	Sub-Locality : _____
Locality : _____	Village/Town : _____
Sub- division : _____	District : _____
State : _____	Country : _____
PIN Code : <input type="text"/>	

15. Whether Permanent Address is same as the Address at the time of death: Yes No

16. if No, Permanent Address

House Name/No : _____	Sub-Locality : _____
Locality : _____	Village/Town : _____
Sub- division : _____	District : _____
State : _____	Country : _____
PIN Code : <input type="text"/>	



17. Date of Cremation/Burial: DD MM YYYY			18. Place of Cremation/Burial : _____		
19. Reason Of Non-Registration of Death, if any : _____					
20. Identity Proof of Applicant (Please tick one, provide the document No. and attach the same)					
<input type="checkbox"/>	Aadhaar Card	<input type="checkbox"/>	Passport	<input type="checkbox"/>	Voter ID Card
<input type="checkbox"/>	PAN Card	<input type="checkbox"/>	Ration Card with Photograph	<input type="checkbox"/>	Driving License
<input type="checkbox"/>	Any Govt. recognized document	Document No :			<input type="text"/>
21. Residential Address Proof of Applicant (Please tick one, provide the document No. and attach the same)					
<input type="checkbox"/>	AADHAR Card	<input type="checkbox"/>	Voter ID Card	<input type="checkbox"/>	Driving License
<input type="checkbox"/>	Passport	<input type="checkbox"/>	Ration Card	<input type="checkbox"/>	Electricity Bill DISCOM Name _____
<input type="checkbox"/>	Water Bill Utility Name _____	<input type="checkbox"/>	Gas Bill Comp Name _____	<input type="checkbox"/>	Any Govt. recognized document
<input type="checkbox"/>	Telephone Bill Company name _____	<input type="checkbox"/>	Bank Passbook	Document No : <input type="text"/>	
<input type="checkbox"/>	Rent Agreement (Registered)				
22. Identity Proof of Deceased (Please tick one, provide the document No. and attach the same)					
<input type="checkbox"/>	Aadhaar Card	<input type="checkbox"/>	Passport	<input type="checkbox"/>	Letter (attested) from School Principal (for minor only)
<input type="checkbox"/>	Voter ID Card	<input type="checkbox"/>	Ration Card with Photograph	<input type="checkbox"/>	School ID Card (for minor only)
<input type="checkbox"/>	PAN Card	<input type="checkbox"/>	Driving License	<input type="checkbox"/>	Birth Certificate (for minor below 5 years only)
<input type="checkbox"/>	Any Govt. recognized document	Document No :			<input type="text"/>
23. Permanent Address Proof of Deceased (Please tick one, provide the document No. and attach the same)					
<input type="checkbox"/>	AADHAR Card	<input type="checkbox"/>	Voter ID Card	<input type="checkbox"/>	Driving License
<input type="checkbox"/>	Passport	<input type="checkbox"/>	Ration Card	<input type="checkbox"/>	Electricity Bill DISCOM Name _____
<input type="checkbox"/>	Water Bill Utility Name _____	<input type="checkbox"/>	Gas Bill Comp Name _____	<input type="checkbox"/>	Any Govt. recognized document
<input type="checkbox"/>	Telephone Bill Company name _____	<input type="checkbox"/>	Bank Passbook	Document No : <input type="text"/>	
<input type="checkbox"/>	Rent Agreement (Registered)				
24. Proof of Death (Please tick one, provide the document No. and attach the same).					
<input type="checkbox"/>	Cremation/Burial Slip	<input type="checkbox"/>	Police enquiry Report	<input type="checkbox"/>	Court Order
<input type="checkbox"/>	Nursing home/Hospital Report	Document No :			<input type="text"/>
Declaration: I hereby solemnly affirm & declare that, all of the above furnished information, is true & correct to the best of my knowledge. I am fully aware that furnishing incorrect or false or forged information will lead to punitive action against me under the relevant statutory provisions.					
Date: DD MM 20YY			Applicant Signature : <input type="text"/>		
Place: _____					

सत्यमेव जयते