



New Delhi Municipal Council
PALIKA KENDRA: NEW DELHI-110001

Application form for Certificate of Death
Section-I

1. Citizen ID :

2. Citizen Name :

3. Citizen Address :

City : Pin Code :

4. Citizen Phone No :

5. Citizen Email ID :

Section-II

To,

The Registrar
Birth and Death
New Delhi Municipal Council
New Delhi

Sir,

Please issue _____ copies of Death Certificate
for my _____ (Relationship).

1. Reg. No :

2. Hospital Name :

3. Sex : Male: Female:

4. Date of Birth :
M M / D D / Y Y Y Y

5. Father's Name :

6. Mother's Name :

7. Place of Death :

8. Residential Address :

City : Pin Code :

9. Phone No :

Yours faithfully,

Signature: _____

Name of Applicant: _____

Address: _____

Date :
M M / D D / Y Y Y Y

Section-III

General Instructions & Guidelines

1. You require following documents for this service.
 - For Non-institutional death.
 - ◆ Hospital proof .
 - For Institutional death
 - ◆ Residential proof.
2. Please come to collect death Certificate after two days.
3. You can also get information about your application status at <http://www.ndmc.gov.in>.
4. In case of delay you can contact_____.