

## **Government of Odisha**

## **Housing & Urban Development Department**

## FORM NO .9

## **APPLY FOR DEATH CERTIFICATE**

(See Rule 8) (Issued under Section 17)

This is to certify that the following information has been taken from the original record of death, which is the register

for (local areas)	of Tahasil
of District of State of Od	lisha.
Name	Place of Death
Name of Father /Mother/Husband	
Sex Permanent Address of Deceased	
Date of Death	
	Registration No.
	Date of Registration
Date	
	Signature of Issuing Authority
	Seal