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# స్వర్ణ గ్రామం స్వర్ణ వార్డు ఆంధ్రప్రదేశ్ ప్రభుత్వం

## Late Registration of Death Application Form

To  
The Revenue Divisional Officer,  
\_\_\_\_\_  
Division,  
\_\_\_\_\_  
District.

Respected Sir,

Sub: - Request for Issue of the Death Registration of my \_\_\_\_\_-regarding.

I, \_\_\_\_\_ S/O / D/O / F/O / M/O / W/O \_\_\_\_\_,  
Age \_\_\_\_ years, occupation: \_\_\_\_\_, R/o H.No. \_\_\_\_\_, Near \_\_\_\_\_, \_\_\_\_\_ Mandal,  
\_\_\_\_\_ Dist. Andhra Pradesh submit the following few lines for your kind perusal and sympathetic favorable  
consideration please.

That my \_\_\_\_\_ name is \_\_\_\_\_ Age \_\_\_\_\_ Years, was died  
on \_\_\_\_\_ (dd/mm/yyyy) at H.No. \_\_\_\_\_, Near \_\_\_\_\_, \_\_\_\_\_  
Mandal/Municipality, \_\_\_\_\_ Dist. Andhra Pradesh. The information regarding  
death of my \_\_\_\_\_ was not informed to the local Births and Deaths Registration Authority of  
\_\_\_\_\_ Mandal/Municipality. Hence the name of my \_\_\_\_\_ is not recorded in the  
Birth & Death Register of \_\_\_\_\_ Mandal/Municipality.

That my Family requires death certificate for \_\_\_\_\_ purpose urgently.

I enclosed here with Non availability certificate issued by the GP or Municipal Commissioner, Ration card copy  
and Self Affidavit.

Therefore I request you kindly to issue necessary orders to Commissioner, Municipal  
Council \_\_\_\_\_ to record date of death of my \_\_\_\_\_ and issue Death Certificate as above at the  
earliest.

### Contact Details:

Landline Number:

Mobile No:

Email ID:

Yours faithfully,

Signature of the Applicant

### Procedure: (following to be enclosed)

- 1) Physical Document\*
- 2) Non availability certificate issued by the GP or Municipal Commissioner#
- 3) Ration card copy#
- 4) Self Affidavit#

\*-mandatory # -any one of them