

EMBASSY OF INDIA
DEATH NOTIFICATION

1. When and where died : _____
2. Name and Surname : _____
3. Sex : _____
4. Age : _____
5. Rank, profession or occupation and claim to Indian Nationality (Passport No., date and place of issue) _____

6. Residence at the time of death _____

7. Signature, description and residence of informant _____

8. (Passport No. date and place of issue) _____

Date :

Place :

Signature of Informant _____
and relationship to _____
the deceased.

CERTIFICATE

I, the undersigned _____,
President/Secretary of the Indian Association, hereby certify that the above information is correct.

Place :

Date :

Signature of the President/Secretary
of the Indian Association

Address & telephone number
of the Indian Association