**ASSISTANT HIGH COMMISSION OF INDIA Photograph**

**NO 31, RAJAPIHILLA MAWATHA, PO Box 47,**

**KANDY**

**Tel: 081 2222652, 2223786, Fax 081 2224563 E-mail: cons.kandy@mea.gov.in**

***Death Registration Form (in respect of the death of an Indian national)***

1. Name & Surname of the deceased (Name or forename should be written in full, followed by surname to be written in Block letters):
2. When & where died ( Date and month in words, year in figures, place of death as precisely as can be ascertained):
3. Sex ( Male or Female):
4. Age (in complete years, months and days):
5. Rank, profession or occupation and claim to citizenship of India (Full particulars of the deceased as entered in the deceased’s Indian Passport should be provided):
6. Place of residence at the time of death:
7. Name, description i.e. relationship (if any between the applicant/ informant and the deceased) & address of applicant/ informant:
8. Signature of applicant/ informant with date: