

**NO PROPERTY CERTIFICATE APPLICATION FORM**

**Applicant Details:-**

**Aadhar Card No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Applicant Name\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Father/Husband Name\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship with Death Person\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Applicant Address:-**

**Door No. \*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Street / Ward No\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_District\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mandal\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Village/Ward\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pin code\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile No\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Id: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Death Person Details:-**

**Death Person Name\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Father/Husband Name\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Door No. \*: \_\_\_\_\_\_\_\_\_\_\_\_ Street / Ward No\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_District\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mandal\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Village/Ward\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pin code\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Death\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Place of Death\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cause of death\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Purpose\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ration Card No\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Location of Death:-**

**State\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ District\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mandal\*: \_\_\_\_\_\_\_\_\_\_\_\_Village/Ward\*:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Delivery Type\*: 🞏 At Kiosk 🞏 Post Local 🞏 Post Non-Local**

**Postal Address:-**

**State\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ District\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mandal\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Village/Ward\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_Locality/Landmark: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Door No: \_\_\_\_\_\_\_\_\_\_\_\_\_ Pin code:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Family Members of the Death Person:-**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Name of the Family Member** | **Age** | **Relationship with Death Person** | **Occupation** | **Marital Status (Married/ Un Married)** | **Educational Qualification** | **Employment (Employee/Un - Employee)** | **Income Per Month** |
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**Documents List: - (NOTE: All Upload Documents are in PDF Format Only)**

**🞏 Application Form\***

**🞏 Ration Card/Aadhar No/Electoral Card\***

**🞏 Death Certificate\***

**🞏 Copy of Family Member Certificate\***

**Applicant’s Signature**