



फॉर्म संख्या/Form No.6

(नियम संख्या 8 देखिए)/(See Rule-8)

राष्ट्रीय राजधानी क्षेत्र, दिल्ली सरकार

Govt. of National Capital Territory of Delhi

पूर्व दिल्ली नगर निगम

East Delhi Municipal Corporation



DEATH

प्रमाण-पत्र / CERTIFICATE

(जन्म एवं मृत्यु पंजीकरण अधिनियम, 1969 की धारा 8/13 के अन्तर्गत जारी किया गया)

17

तथा दिल्ली जन्म एवं मृत्यु पंजीकरण नियम, 1999 के नियम

(Issued under section 17 of the Registration of Births and Deaths Act, 1969 and Rule 8/13 of the Delhi Registration of Births and Deaths Rules, 1999 )

यह प्रमाणित किया जाता है कि निम्नलिखित सूचना

के मूल लेक से ली गई है जोकि राष्ट्रीय राजधानी

this is to certify that the following information has been taken from the original record of DEATH which is the

पूर्व दिल्ली नगर निगम क्षेत्र के रजिस्टर में उल्लिखित है य

register for East Delhi Municipal Corporation of Sh. South Zone Zone of N.C.T of Delhi

नाम/ Name MISS ITEESHA

लिंग/ Gender Female

तिथि/ Date of death 26/11/2017

स्थान/ Place of death SHANTI MUKAND HOSPITAL VIKAS MARG EXT. NEW DELHI

पंजीकरण की तिथि/ Date of Registration 05/12/2017

पंजीकरण संख्या/ Registration No. MCDOLIR-3117-004862730

Name of Mother DR. RAJNI DEVI

Name of Father DR. RAKESH KUMAR NAIN

Present Address D/O: RAKESH KUMAR NAIN, PC-25, GANGA NAGAR, MEERUT, UTTAR PRADESH, 250001

Permanent Address D/O: RAKESH KUMAR NAIN, PC-25, GANGA NAGAR, MEERUT, UTTAR PRADESH, 250001

Date: 05/12/2017

Note: This Certificate is Computer Generated and Does Not Require Any Seal/Signature In Original. The Authenticity Of this Certificate Can Be Verified at www.mcdonline.gov.in. The Registration Number is Unique to Each Death.

DEATH



Ensure registration of every birth and death