

Form No. 8

Annexure
Form VIII

THE CORPORATION OF THE CITY OF PANAJI

DEATH REPORT

Legal Information

This part to be added to the Death Register

To be filled by the informant

1.	Date of Birth : (Enter the exact day, month and year the death took place (e.g. 1-1-2000)
2.	Name of the deceased : (Full name as usually written)
3.	Sex of the deceased : (Enter "Male or female",do not use abbreviation)
4.	Age of the deceased (if the deceased was over 1 year of age, give age in completed years, If the deceased was below 1 year of age, give age in months and if below 1 month give in completed number of days, and if below one day, in hours.)
5.	Place of death : (Tick the appropriate entry 1,2 or 3 below and give the name of the Hospital/Institution or the address of the house where the death took place. If other place, give location)
	1. Hospital/Institution Name :
	2. House Address :
	3. Other place :
6.	Name of the father/husband :
7.	Informant's name : Address : (After completing all columns 1 to 17, informant will put date and signature here:)
	Date: _____ Signature or left thumb mark of the informant _____

<i>To be filled by the Registrar</i>	
Registration No. :	Registration Date:
Registration Unit :	

Town/Village :
Remarks : (If any)

District :

Name and Signature of the Registrar

Click [here](#) to fill in the **Statistical Information in Death Report**

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