

FORM 6C
(see rule 3)



GOVERNMENT OF KERALA
LEGAL HEIRSHIP CERTIFICATE

Number :Date:

Name of Deceased	
Gender	
Date of Death	
Address with Pin Code	

Certified that the person(s) mentioned below is/are legal- heir(s) of the deceased mentioned above and the nature of relationship is as stated.

Name	Relationship with the deceased	Age

Date of issue of certificate	
Designation of the issuing officer	
Name of office	
Purpose issued for	

This certificate is issued based on the details given in the application, local enquiry, facts and records produced and notification published in the Kerala Gazette No. xxxxxxxx, Volume xxx dated xxxxxx.

Signature / Digital Signature of the Approving Authority

NOTE:

1. This digitally signed document is legally valid as per the Information Technology (IT) Act, 2000.
2. Authenticity of this document can be verified from <http://edistrict.kerala.gov.in/>