

CONSULATE GENERAL OF INDIA, JEDDAH (SAUDI ARABIA)

DEATH INTIMATION FORM*(PLEASE FILL ALL COLUMNS)*

NAME OF DECEASED PERSON IN CAPITAL LETTER (AS PER PASSPORT)			
PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH	
		ENGLISH DATE	
		HIJRI DATE	
PASSPORT DETAILS		IQAMA DETAILS	
PASSPORT NO.		IQAMA NO	
PASSPORT DATE		PLACE OF ISSUE	
PLACE OF ISSUE		EXPIRY DATE	
DETAILS OF FAMILY MEMBERS IN INDIA			
NAME			
FULL POSTAL ADDRESS			
TEL/MOBILE/FAX			
E-MAIL			
DETAILS OF SPONSOR/COMPANY IN K.S.A			
NAME OF SPONSOR			
POSTAL ADDRESS			
TEL/ MOBILE.NO.			
FAX NO.			
E-MAIL ID			
DETAILS OF RELATIVE/FRIEND/ATTORNEY IN K.S.A			
NAME			
POSTAL ADDRESS			
TEL/MOBILE /FAX			
DISPOSAL OF THE DEAD BODY <i>(TICK THE CORRECT ONE)</i>		BURIAL IN KSA	
		TRANSPORTATION TO INDIA	
WAKALA PAPER FROM INDIA ISSUED BY: <i>(MENTION THE NAME & RELATIONSHIP)</i>			
DETAILS OF CAUSER OF DEATH (ROAD ACCIDENT / MURDER CASE ONLY)			
NAME OF CAUSER			
NATIONALITY OF CAUSER			
% OF RESPONSIBILITY FOR DEATH			
STATION		SIGNATURE	
DATE		NAME	
		TEL/MOBILE NO.	