FORM 16C (see rule 3)



GOVERNMENT OF KERALA LIFE CERTIFICATE

Number:	Date:
Certified that the person with the particulars mentioned below is alive:	
Name of Person to whom certificate is issued	
Gender	
Age	
Name of Father / Mother	
Address	
Post Office with Pin code	
Name of Local Body	
Village	
Taluk	
District	
Date of issue of certificate	
Designation of the issuing officer	
Name of office	
Purpose for which the certificate is issued for	

This certificate is issued based on the details given in the application, local enquiry, facts and records produced.

> Signature / Digital Signature of the Approving Authority

NOTE:

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