



NATIONAL REGISTRATION ACT / LAMULO LA KALEMBERA WA DZIKO

DEATH REPORT / KALATA YA CHIDZIWITSO CHA IMFA

WARNING: In terms of Section 43 of the ACT, any person, who furnishes false information or forges any document for the purpose of obtaining registration of Death of a person shall be guilty of committing an offence. **CHENJEZO:-** Malingana ndi gawo 43 ya lamulo la kalembera wadziko, aliyense wopeleka umboni wabodza, kapena makalata achinyengo ndi cholinga choti alembetse za imfa ya munthu adzaimbidwa mulandu.

NOTE: Please read instructions at the back of the form / Welengani malangizo ali kuseli kwa fomuyi.

NR-10C

SECTION-1: Particulars of Deceased / Mbiri ya Omwalira

PART 1 PERSONAL DETAILS OF DECEASED GAWO LOYAMBA MBIRI YA MUNTHU OMWALIRA	1	Surname/Dzina la bambo _____ First name/Dzina loyamba _____ Other names/Maina ena _____		
	2	ID No./Nambala ya chiphaso cha dziko/chobadwa _____	3	Nationality/Nzika ya dziko liti? _____
	4	Male/Mwamuna ☐ Female/Mkazi ☐		
	5	Date of Birth/Tsiku lobadwa: Day/Tsiku..... Month/Mwezi Year/Chaka.....		
	6	Date of Death/Tsiku lomwalira: Day/Tsiku..... Month/Mwezi Year/Chaka.....		
	7	Place of Death (Tick the appropriate option)/ Malo omwalira (Sankhani malo amodzi oyenelera) ☐ Health Facility/Kuchipatala Name/Dzina..... Address/Keyala..... ☐ Home/Kunyumba District/Boma..... TA/Mfumu yaikulu..... Village/Town/Mudzi..... ☐ Others (Give Details)/Malo ena (fotokozerani).....		
	8	Manner of death/Anamwalira bwanji: Natural/Mwachilengedwe ☐ Accident/Pangozi ☐ Homicide/Anaphedwa ☐ Suicide/Anadziza ☐ Pending Investigation/Akufufuzabe ☐ Could not be determined/Sizikudziwika ☐ Other/Zina ☐ Specify/Fotokozerani _____		
	9	If accidental death/Ngati ndi Ngozi, how did it occur/Inachitika bwanji: Motor vehicle(driver)/Ya Galimoto (Woyendetsa) ☐ Motor vehicle (passenger)/Ya Galimoto (Wokwera) ☐ Motor vehicle (Pedestrian)/Ya Galimoto Oyenda pansa ☐ Drowning/Anamila mmadzi ☐ ; Other/Zina ☐ Specify/Fotokozerani _____		
	10	Physical residential address/Malo kumene amakhala District/Boma..... TA/Mfumu yaikulu..... Village/Town/Mudzi.....		
	11	Home address/Kumudzi kwao: District/Boma..... TA/Mfumu yaikulu..... Village/Town/Mudzi.....		
	12	In case this is death of a female, did the death occur while pregnant, at the time of delivery or within 6 weeks after end of pregnancy? Ngati omwalira anali wamkazi, panthawi yomwe anamwaliraye anali ndi mimba, kapena anamwalira nthawi yobeleka, kapena pasanathe masabata asanu ndi imodzi (6) kuchokera panthawi imene anabereka kapena pamene mimba inachoka? Yes/Inde ☐ No/Ayi ☐ Unknown ☐		
	PART 2 DETAILS OF PARENTS GAWO LACHIWIRI MBIRI YA MAKOLO	1	Mother's name: _____ Surname/Dzina la bambo _____ First Name /Dzina loyamba _____ Other Names/Maina ena _____	
2		ID No./Nambala ya Chiphaso cha dziko.....	3	Nationality/ Ndi nzika ya dziko liti?
4		Father's name: _____ Surname/Dzina la bambo _____ First Name /Dzina loyamba _____ Other Names/Maina ena _____		
5		ID No./Nambala ya Chiphaso cha dziko	6	Nationality/ Ndi nzika ya dziko liti?
PART 3 INFORMANTS DETAILS GAWO LACHITATU MBIRI YA WOLEMBETSA		1	Name: _____ Surname/Dzina la bambo _____ First Name /Dzina loyamba _____ Other Names/Maina ena _____	
	2	ID No./Nambala ya Chiphaso cha dziko.....	3	Relationship to the deceased/ Ubale ndi munthu omwalira
	4	Physical Address/Keyala District/Boma..... TA/Mfumu yaikulu Village/Town/Mudzi Postal Address/Keyala Telephone No./Namabala ya foni		
	5	I certify that the above information is correct and I am aware that I could face criminal prosecution if this information is incorrect in material respect / Ndikuvomereza kuti umboni omwe ndikupelekelawu ndiwoona ndipo ndikudziwa kuti ndidzaimbidwa mlandu ngati umboniwu uli wabodza. Date: Day/Tsiku..... Month/Mwezi..... Year/Chaka..... Signature/Thumb mark of Informant/Sainani.....		

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SECTION-2

ACKNOWLEDGEMENT OF RECEIPT / KUVOMEREZA KUTI NDALANDIRA

Acknowledge the receipt of Death Report of/Ndikutsimikizira kuti ndalandira chidziwitso cha imfa ya:

Surname/Dzina la bambo _____ First Name/Dzina loyamba _____ Other Names/Maina ena _____

Date of birth/Tsiku lobadwa: Day/Tsiku _____ Month/Mwezi _____ Year/Chaka _____, Sex _____,

with ID No./Nambala ya chiphaso _____ Date of Death/Anamwalira pa: Day/Tsiku _____ Month/Mwezi _____ Year/chaka _____

Place of Death / Malo Omwalira _____ as reported by / limene lapelekedwa ndi _____

Signature/Sainani _____ Date/Tsiku _____ Death Register entry No. _____

Official Stamp

Verification by Village Headman/Block Leader

I, Village Headman/Block Leader/*I*ne, Nyakwawa..... of the Village/Area/Town/wa *m'mudzi* wa
TA/*Mfumu* yaikulu....., District/*Boma* la..... hereby certify that the information given above in
relation to the Informant and the Deceased in question is correct to the best of my knowledge and belief/*ndikutsimikiza kuti zimene*
zalembedwa pamwambazi zokhudzana ndi mbiri ya womwalirayo ndizoona.

Signed/Thumb Print / *Sainani kapena Dindani* Date & Stamp / *Tsiku ndi chidindo*

Verification by Senior Member of Village/ Religious Institution

I/Ine.....Senior Member of Village/Cleric of / *Msogoleri wamkulu/Kalaliki* wa.....
(Village/institution)/*Mudzi/bungwe* hereby certify that the information given above in relation to the death of the deceased in question
is correct to the best of my knowledge and belief/ *ndikutsimikiza kuti zimene zalembedwa pa mwambazi zokhudzana ndi mbiri ya*
womwalirayo ndizoona.

Signed/Thumb Print /*Sainani kapena Dindani* Date & Stamp /*Tsiku ndi chidindo*

Senior Member of Village/Religious Leader/*Mtsogoleri wamkulu/Mkulu wa chipembezo*

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Recommendation by the District Registrar

I hereby state that I have checked this application and certify that the same has been duly completed in accordance with the
National Registration Act and the Regulations thereof to the best of my knowledge and information.

Signature with Stamp.....

Date of Registration: DayMonth.....20.....

Death Entry Number.....

GENERAL INSTRUCTIONS

- Complete the form in CAPITAL LETTERS and tick(✓) in appropriate box / *Lembani ndi malemba akuluakulu ndipo chongani malo oyenerera.*
- ID No is Number printed on ID Card or Birth Certificate issued by NRB /*Nambala ya chiphaso cha dziko ndi nambala yomwe ili pa kadi ya unikaolo pa chiphaso cha kubadwa.*
- Provide names as given on ID Card/ Birth Certificate/*Gwiritsani ntchito mayina omwe ali pa chiphaso chadziko kapena chobadwa.*
- Address should include Villate/Town/Traditional Authority/District / *Keyala itchule Mudzi/Tauni/Mfumu yaikulu/Boma.*
- Informant may be mother/father/close relative / *Wolembetsa mwana akuyenera kukhala mayi/bambo/wachibale.*