

GOVERNMENT OF WEST BENGAL  
Office of the Estate Manager, Kalyani  
Urban Development Department  
D.C. Building, Kalyani, Nadia.

**DOCUMENTS TO BE SUBMITTED FOR "DEATH MUTATION"**

1. Death certificate in original of deceased along with xerox copy.
2. An affidavit duly sworn before a 1st Class Judicial Magistrate declaring thereon by the legal heirs as per format enclosed.
3. A relationship certificate from Group 'A' officer of West Bengal Government as per format enclosed.
4. A copy of sanctioned building plan duly approved by Kalyani Municipality.
5. Four copies T.R. Form No. 7 for depositing Rs. 500/- (Rupees Five hundred) only as death mutation processing fee.
6. Urban Land Ceiling clearance, if the area of the land exceeds 7.5 cottahs.
7. Mortgage clearance certificate if the plot is under mortgage.
8. Attested photo & signature of the applicants as per format.
9. Xerox copy of photo identity card (attested).
10. Original certified copy of registered lease deed.
11. Original certified copy of earlier Deed of Transfer of the plot, if any.

IN THE COURT OF THE 1ST. CLASS JUDICIAL MAGISTRATE  
AFFIDAVIT

I/We \_\_\_\_\_ S/O,D/O,W/O \_\_\_\_\_  
by religion \_\_\_\_\_, by occupation \_\_\_\_\_, by nationality \_\_\_\_\_, aged about \_\_\_\_\_ years,  
residing at \_\_\_\_\_ do hereby solemnly affirm and declare as  
follows:-

1. That Sri/Smt. \_\_\_\_\_ of \_\_\_\_\_ (address) \_\_\_\_\_  
\_\_\_\_\_ was a Hindu/Muslim/Chirstain, an allottee/a Lessee of plot No. \_\_\_\_\_ at  
Kalyani, the District of Nadia, at the time of his/her death on (date \_\_\_\_\_). He/She was a  
bachelor. He/She has no issue, he/she issue of sons \_\_\_\_\_ daughters \_\_\_\_\_.
2. That the said Sri/Smt. \_\_\_\_\_ hereinafter referred to as the "Deceased"  
died intestate and left no Will or Codicil. In the case of minor mother/father of the minor stands as  
natural guardian and all responsibilities and obligations are lies-upon the natural guardian still  
they becomes established.
3. That I/We \_\_\_\_\_ (name) \_\_\_\_\_ am/are \_\_\_\_\_ (relation) \_\_\_\_\_  
of the said "Deceased" who has no (other) son and daughter, or no other legal heir(s) and I/We  
am/are also his/her sole legal heir(s), according to the provisions of the Hindu Succession Act.,  
1955/Indian Succession Act., 1925. Parents of the Deceased pre-deceased him/her.
4. That the aforesaid plot No. \_\_\_\_\_ at Kalyani has become my/our exclusive property by  
virtue of the Law of inheritance.
5. That I/We require that mutation be allowed in my/our name(s) jointly for all legal purposes and  
intents in place of the name of the "Deceased" in respect of the aforesaid plot of land.
6. That I/We severally and jointly indemnify the Government of West Bengal and all other authorities,  
which allotted the said plot in favour of the said "Deceased" harmless against all or any loss or claim  
in future for mutation of the said plot in my/our favour.
7. That the said "Deceased" has no other land or building as owner/Lessee etc. situated within the  
"Urban Agglomeration" as defined in the Urban Land (Ceiling & Regulation) Act., 1976.  
(Detailed particulars of land/building owned/possessed by deceased allottee stated)
8. That my/our family/families, as defined in the aforesaid U.L(C&R) Act., hold(s) do(es) not hold any  
land(s)/building(s) as Lessee(s)/Owner(s) etc., situated within the said "URBAN  
AGGLOMERATION".  
(Detailed particulars of land and building, if any, owned/possessed by deponents to be stated)
9. That by acquiring the aforesaid plot of land I/We shall not be hit by the provisions of the aforesaid  
U.L(C&R) Act., and shall not be liable to submit any return under the said Act.
10. That I/We shall abide by all terms and conditions of the original lease agreement (executed in respect  
of the plot in question) where shall be applicable to me/us as legal heirs of the said "Deceased".
11. That I/We shall abide by the terms and conditions of Lease Agreement, already entered into by the  
said "Deceased" and accepted by the Government on \_\_\_\_\_ (date) \_\_\_\_\_.
12. That we shall make construction of a residential building on the Plot No. .... at Kalyani within six  
months from date of issue of death mutation order failing which Govt may resume the plot and we  
shall not transfer the plot to anybody else.  
That the statements made in the foregoing paragraphs are true to the best of my/our knowledge and  
belief.

\_\_\_\_\_  
DEPONENT(S)

Read over & explained by the  
Deponent(s) who is/are identified by  
me. The contents are admitted by the  
Deponent(s) to be correct.

\_\_\_\_\_  
ADVOCATE

(Full Signature with address)

\* Clause or a part thereof, which is not applicable, shall be omitted at the time of  
writing/typing the contents on the requisite Non-Judicial Stamp paper.

TO BE FURNISHED BY A WEST BENGAL STATE GOVERNMENT GROUP 'A' EMPLOYEE AS DEFINED IN WEST BENGAL SERVICE R.O.P.A. RULES, 1990.

Certified that Late \_\_\_\_\_ son of \_\_\_\_\_  
\_\_\_\_\_ of (full address) \_\_\_\_\_  
\_\_\_\_\_ died on \_\_\_\_\_. Names of the  
legal heirs and their relationship with the deceased are stated below from Sl. No.  
\_\_\_\_\_ to \_\_\_\_\_.

Sl.No.	Name of sole legal heirs	Relationship	Age

2. I have enquired and certify that above named persons are sole legal heirs of Late \_\_\_\_\_ and the truthfulness of this certificate to the best of my knowledge and belief.

\_\_\_\_\_  
SIGNATURE  
(Group 'A' Official of State Govt.)

Name in full :  
[IN BLOCK LETTERS]  
Designation with office seal :  
  
Address :

- N.B.** 1. The legal heirs should include names of all the relations as per succession Act.  
(For a male Hindu).  
**Class I relations** : Sons, daughters, widow, mother widow/sons/daughters of a predeceased son or sons/daughters or a predeceased daughter & grand children of predeceases sons/daughters.  
**Class II relations** : ( If there is no heir of Class-I) Father son's, daughters son, daughter brother, sister etc.  
(For a Female Hindu) the widow in Class I should be substituted by husband and the mother is omitted & class II will be the heirs of husband only.
- N.B.-** 2. The Issuing Authority/Officer is warned of any possible suppression/misrepresentation of facts by the legal heir or heirs. The mutation certificate will be issued relying mostly on this certificate. An fraud or willful omission or commission in withholding names of any legal heirs detected afterwards will current to a charge of abetting the persons making false claims forging documents and swearing false affidavit which are all criminal offences to be tried in criminal Court.

T.R. FORM NO. 7/টি.আর. ফর্ম নং-৭

(See S.R. 46/এস.আর.-৪৬ দ্রষ্টব্য)

Challan for Deposit of money in the account of GOVERNMENT OF WEST BENGAL

পশ্চিমবঙ্গ সরকারের খাতে টাকা জমা দিবার চালান

1. Name of the Bank and Branch/ব্যাঙ্কের এবং শাখার নাম :

2. (a) Name of the Treasury/ট্রেজারীর নাম :

(b) Treasury Code/ট্রেজারীর সান্কেতিক চিহ্ন :

3. Account Code/হিসাবখাত নং :

(14-Digits must be filled up properly/১৪-ঘব সঠিকভাবে অবশ্যই পূরণ করতে হবে)

4. Detail Head of Account/হিসাবখাতের বিশদ বিবরণ :

5. (a) Amount/টাকা : Rs.

(b) In Words : Rupees—

কথায়—

6. By whom tendered—Name and Address/যে টাকা জমা দিচ্ছে তার নাম, ঠিকানা :

7. Name/Designation and Address of the Departmental Officer on whose behalf/favour money is paid/যে বিভাগীয় আধিকারিকের হয়ে/জন্য টাকা জমা দেওয়া হচ্ছে তার নাম/পদের নাম এবং ঠিকানা :

8. (a) Particulars and Authority of Deposit/যে কারণে এবং ক্ষমতা অনুসারে টাকা জমা দেওয়া হচ্ছে :

\* (b) T.V. No. and Date of A.C. Bill/এ.সি. বিলের টি.ভি. নং এবং তারিখ :

9. Accounts Officer by whom adjustable

একাউন্টস অফিসার যাঁহার খাতায় জমা হইবে

Accountant General (A&E), West Bengal

মহাগণনিক (হিসাব ও হক), পশ্চিমবঙ্গ

Verified/পরীক্ষিত

Signature of Departmental/Treasury Officer

বিভাগীয়/ট্রেজারী আধিকারিকের স্বাক্ষর

Depositor's Signature/আমানতকারীর স্বাক্ষর

Date/তারিখ :

Treasury Received Challan No./ট্রেজারী গৃহীত চালান নং :

Received payment/টাকা পাওয়া গেল

Bank Scroll Serial No./ব্যাঙ্কের স্ক্রলের ক্রমিক নং :

Receipt by the Bank/Treasury/ব্যাঙ্কের/ট্রেজারী রসিদ

Signature with seal of the Bank

Date/তারিখ :

ব্যাঙ্কের শীলমোহরসহ গ্রহীতার স্বাক্ষর

\* In respect of Challan relating to refund of unspent amount of A.C. Bill.

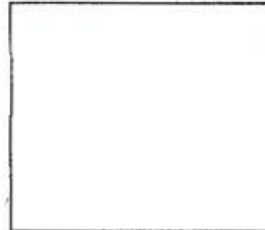
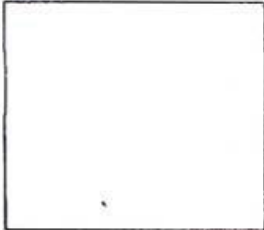
এ.সি. বিলে উত্তোলিত অগ্রিমের অব্যয়িত অর্থ ফেরত দেওয়ার চালানের জন্য



**FORMAT FOR SUBMISSION OF PASSPORT SIZE PHOTOGRAPHS AND SPECIMENT SIGNATURE OF ALLOTTEE DULY ATTESTED BY A STATE GOVERNMENT GROUP 'A' OFICER/BY THE GOVERNMENT OF INDIA EQUIVALENT STATUS.**

Passport size photographs of Sri/Smt. \_\_\_\_\_  
S/O, W/O, D/O. \_\_\_\_\_ residing at \_\_\_\_\_

ALLOTTEE/ ALLOTTEE(S) of plot No./House No. \_\_\_\_\_ at Kalyani Township.



Attestation should be made by State Govt. Group 'A' Officer or Officer of the Govt. of India in equivalent status of the photographs with his seal and the following:

1. Name in full of the officer ::
2. Office Seal ::
3. Address of officer ::

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PART - II

Specimen signature of Sri/Smt. \_\_\_\_\_  
S/O, W/O, D/O. \_\_\_\_\_ residing at \_\_\_\_\_  
allottee/allottees  
of plot No./House No. \_\_\_\_\_ at Kalyani.

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_

Above signature(s) of Sri/Smt. \_\_\_\_\_ is attested by me.

Signature of State Govt. Group 'A' Officer or Officer of the Govt. of India in equivalent status

Name in full of the Officer :: \_\_\_\_\_  
Address :: \_\_\_\_\_  
Office Seal :: \_\_\_\_\_  
Address of Officer :: \_\_\_\_\_