



EMBASSY OF LEBANON
BELGRADE

**Application for Death
Registration**

Full name (Arabic & English)	
Date & Place of Birth	
Father's Name	
Mother's Maiden Name	
Place & Number of Registry in Lebanon (District)*	
Confession	
Marital Status (Single, Married, Widow)	
Name of Spouse's	
Place of Death	
Date of Death (DD/MM/YYYY)	

Applicant's Phone Number and Address in Serbia, Bosnia and Herzegovina, Macedonia or Montenegro

I hereby declare, on my honour, that the above information is correct (including attached documents), and I assume full responsibility for any false declaration.

Signature _____ Place & Date of Application _____

* In accordance with the Lebanese Identity Card or Family Registry Extract.