In exercise of the Powers conferred under Section 21 of the Code of Criminal Procedure, 1973 and all other powers enabling in this behalf, the Administrator of U.T. of Daman & Diu and Dadra & Nagar Haveli hereby appoints the following Officers as Special Executive Magistrate and confers the powers of Executive Magistrate under the Code of Criminal Procedure, 1973 for the purpose of maintaining Law and Order during forthcoming General Lok Sabha Election for Diu District with immediate effect till election process is over.

1. Shri Anil A. Solanki, Education Officer, (D. P.) Diu.
2. Shri C. B. Patel, Education Officer, Diu.
3. Shri Lekhraj, Chief Officer, DMC, Diu.

By Order and in the name of the Administrator of Daman & Diu and Dadra & Nagar Haveli.

Sd/-
(R. K. Saxena)
Deputy Secretary (Home)
No. DPS/306(10)/2013-14/1621
Administration of Daman and Diu,
Deptt. of Planning & Statistics,
Secretariat, Fort Area,
Moti Daman – 396 220.

Dated : 25/03/2014.

Read : Letter No. 1/7/2011-VS(CRS) dated 03/06/2013 from Dy. Director,
Ministry of Home Affairs, Office of Registrar General, India, New Delhi.

NOTIFICATION

In exercise of the powers conferred by section 30 read with section 2 (f) of the
Registration of Births and Deaths Act, 1969, the Administrator of UT of Daman and Diu
hereby makes the following rules further to amend the Daman and Diu Registration of Births
and Deaths Rules, 2000 namely.

1. Short title, extent and commencement :

1) These rules may be called the Daman and Diu Registration of Births and Deaths
(Amendment) Rules, 2014.
2) They shall extend to the whole of the Union Territory of Daman & Diu.
3) They shall come into force from the date of its publication in the Official Gazette.

2. Amendment of Form No. 2, (Death Reporting Form ) – In the Daman and Diu
Registration of Births and Deaths Rules, 2000, (hereinafter referred to as the
“Principal Rules,”) the following entries shall be substituted in place of entries at
Sr. No. 6 and 7 in Form No. 2.
6. (A) Name of Mother :
6. (B) Name of Father :
7. Name of Husband/Wife :

3. Amendment of Form No. 6, (Death Certificate) – Entries in Form No. 6 shall be
modified as tabulated below :

<table>
<thead>
<tr>
<th>Existing</th>
<th>Modified</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of mother</td>
<td>Name of Mother</td>
</tr>
<tr>
<td></td>
<td>Name of Father</td>
</tr>
<tr>
<td>Name of father/Husband</td>
<td>Name of Husband/Wife</td>
</tr>
</tbody>
</table>

The revised Forms No. 2 and 6 are appended herewith.

By order and in the name of the
Administrator of Daman & Diu

Sd/-
( Dr. S. D. Bhardwaj )
DY. SECRETARY (PLANNING)
Sahout Pradesha Daman and Diu Administration (U.T.)
Department of Planning and Statistics

Death Certificate

This is to certify that the following information has been taken from the original record of death which is in the register for ______________ of Tahsill __________________ of District __________________ of Union Territory of Daman & Diu.

Name / Name

Date of Death

Place of Death

Name of Mother

Name of Father

Name of Husband/Wife

Address of the deceased at the time of death:

Permanent address of the deceased:

Registration No.

Date of Registration

Remarks (if any)

Date of issue

Pradhan Karti Prashikhe Darpan/Signature of the issuing authority

Pahleka Jnan avidh Daman ka Prakasak Vyaktitva / Ensure registration of every birth and death

Mohur / Seal
## FORM NO. 2
Administration of Daman and Diu (U.T.)
Department of Planning and Statistics

### DEATH REPORT
(See Rule 5)

#### LEGAL INFORMATION

The part is to be added to the Death Register

#### To be filled by the Informant

1. **Date of Death:**
   
   [Enter the exact day, Month and year the death took place e.g., 1-1-2000]

2. **Name of the Deceased:**
   
   [Full name as usually written]

3. **Sex of the Deceased:**
   
   [Enter "Male" or "Female"; do not use abbreviation]

4. **Age of the Deceased:**
   
   [If any deceased was over 1 year of age, give age in completed years. If the deceased was below 1 year of age, give age in months; and if below 1 month give age in completed number of days, and if below one day, in hours]

5. **Place of Death:**
   
   [Tick the appropriate entry 1, 2 or 3 below and give the name and address of the Hospital/Institution or the address of the place where the death took place]
   
   1. **Hospital/Institution Name:**
      
      [Specify name]
      
      **Address:**

   2. **Address of other place of death:**

   3. **(A) Name of Mother:**

   4. **(B) Name of Father:**

   5. **Name of Husband/Wife:**

   6. **Informant's name:**

      [Address:

      (After completing all columns 1 to 15, informant will put date and signature here.)

   **Date:**

   **signature or left thumb mark of the Informant**

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### FORM NO. 2
Administration of Daman and Diu (U.T.)
Department of Planning and Statistics

#### DEATH REPORT
(See Rule 5)

#### STATISTICAL INFORMATION

This part is to be detached and sent for statistical processing

#### To be filled by the Registrar

1. **Registration No.:**

2. **Registration Date:**

3. **Registration Unit:**

4. **District:**

5. **Town/Village:**

6. **Remarks:**

   [If any]

   **Name and Signature of the Registrar**

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### FORM NO. 2
Administration of Daman and Diu (U.T.)
Department of Planning and Statistics

#### DEATH REPORT
(See Rule 5)

#### To be filled by the Informant

9. **(a) Address of Parents at the time of death:**
   
   1. **House No.:**

   2. **Hamlet/Street:**

   3. **Village/Ward:**

   4. **Block/Tehsil/Town:**

   5. **District:**

   6. **State:**

   7. **(b) Permanent Address of Parents:**

      1. **House No.:**

      2. **Hamlet/Street:**

      3. **Village/Ward:**

      4. **Block/Tehsil/Town:**

      5. **District:**

      6. **State:**

10. **Religion:**

    [Tick the appropriate entry below]

    1. **Hindu**

    2. **Muslim**

    3. **Christian**

    4. **Any other religion:**

    5. **(Write name of the religion)**

11. **Occupation of the deceased:**

    [If no occupation, write "Nil"]

12. **Types of medical attention received before death:**

    1. **Institutional**

    2. **Medical attention other than Institution**

    3. **No medical attention**

13. **Was the cause of death medically certified?**

    [Tick the appropriate entry below]

    1. **Yes**

    2. **No**

14. **Name of Disease or Actual cause of Death:**

    [For all deaths irrespective of whether medically certified or not]

15. **In case, this is a female death, did the death occur while pregnant, at the time of delivery, or within 4 weeks after the end of pregnancy?**

    [Tick the appropriate entry below]

    1. **Yes**

    2. **No**

16. **If used to habitually smoke -**

    [Yes/No]

    [If yes, for how many years?]

17. **If used to habitually chew tobacco in any form -**

    [Yes/No]

    [If yes, for how many years?]

18. **If used to habitually chew arecanut in any form including pan masala -**

    [Yes/No]

    [If yes, for how many years?]

19. **If used to habitually drink alcohol -**

    [Yes/No]

    [If yes, for how many years?]

**Remarks:**

   [Columns to be filled in over, now put signature at left]

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**SEROIES II No.: 13**

**DATED: 28TH MARCH, 2014**
U.T. Administration of Daman and Diu,
Department of Planning & Statistics
Secretariat, Fort Area,
Moti Daman – 396 220.

No. DPS/SIC/2013-14/1622       Dated : 25/03/2014

Read : Notification No. DPS/SIC/2013-14/687 dated 09/09/2013 issued by
Dy. Director (Plg.), Secretariat, Moti Daman.

ADDENDUM

In continuation of Notification referred to above, the Administrator, U.Ts. of Daman & Diu and Dadra & Nagar Haveli is pleased to include following as Non Official members of the U.Ts. Innovation Council (UTInc) of U.T. Administration of Daman & Diu and Dadra & Nagar Haveli.

1. President, Daman Industries Association, Daman : Member
2. President, Hotel Association, Daman : Member
3. President, Hotel Association, Diu : Member
4. President, Hotel Association, Dadra & Nagar Haveli : Member
5. Representative, Confederation of Indian Industries (CII) : Member
6. President, Silvassa Industries & Manufacturer Association (SIMA) : Member

By order and in the name of the Administrator, Daman & Diu and Dadra & Nagar Haveli

Sd/-
( Dr. S. D. Bhardwaj )
Dy. Secretary (Planning)/
Nodal Officer (UTInc)
No. ATP/DMN/App/tt./JTP/2012/4067
Administration of Daman & Diu,
Department of Personnel &
Administrative Reforms,
Secretariat,
Daman – 396 220.

Dated : 25/03/2014.


ORDER

In pursuance to the recommendations of the Union Public Service Commission contained in their letter referred to at preamble above, the Administrator of Daman & Diu is pleased to appoint Shri Jignesh Makkana, Planning Assistant, Dept. of Town and Country Planning, Diu to the post of Junior Town Planner, Diu in the pay Scale of PB-3 Rs. 15600-39100/- + Grade Pay Rs. 5400/- In the U.T. Administration of Daman & Diu. He shall draw his salary from the vacant post of Junior Town Planner, Diu with effect from the date of his joining the post.

The deputation period of Shri Jignesh Makkana, Junior Town Planner, Diu will be initially for a period of one year and will be governed on the usual terms and conditions contained in the Government of India’s Ministry of Finance O.M. No. F.1(11)-E-III(B)/75 dated 07/11/1975 and as amended from time to time.

By order in the name of the
Administrator of Daman & Diu

Sd/-
(R. K. Saxena)
Deputy Secretary (Per)

※※※
U. T. ADMINISTRATION OF DAMAN & DIU
SECRETARIAIT, MOTI DAMAN


NOTIFICATION

In exercise of the power conferred by sub-section (2) of section 66 of the Daman and Diu Value Added Tax Regulation, 2005 (1 of 2005) and all other powers enabling him in this behalf, the Administrator of Daman and Diu is pleased to appoint with immediate effect, Shri R. K. Saxena, DANICS Entry Grade Daman & Diu as the Deputy Commissioner (VAT), Daman & Diu, for carrying out the purpose of the said Regulation.

By order and in the name of the Administrator of Daman & Diu.

Sd/-

(KISHORE J. BUMANIA)
Joint Secretary (Taxation)

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