

**APPLICATION FOR DEATH CERTIFICATE**  
(PLEASE PRINT CLEARLY)

**THIS IS A REQUEST FOR THE DEATH CERTIFICATE OF:**

FULL NAME \_\_\_\_\_ DATE OF DEATH \_\_\_\_\_

# OF COPIES REQUESTED \_\_\_\_\_ (\$20.00 EACH - CASH OR MONEY ORDER)

**I CERTIFY THAT THE PERSON NAMED IN THE CERTIFICATE REQUESTED IS:**

MY SPOUSE     CHILD     MY GRANDCHILD     MY PARENT

A PERSON I LEGALLY REPRESENT     OTHER \_\_\_\_\_

**INFORMATION OF PERSON MAKING THIS APPLICATION:**

PRINTED FULL NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**Please make sure all information is included to expedite your Death Certificate**

- Completed Application Form
- Copy of Valid Drivers License or Government Issued Photographic Identification
- Money order or cash for the amount - No personal checks
- Self Addressed Stamped Envelope

Mail Your Request to:

**Vital Statistics**  
**235 Grand Street**  
**Waterbury, CT 06702**