

# Request for a Certified Copy of a DEATH Certificate from the Town of Death

**Mail this request to the Town Vital Records office. For the address and phone number of Town Vital Record offices in Connecticut, please refer to the State of CT website at [www.ct.gov/dph.com](http://www.ct.gov/dph.com) or if the town is Berlin mail to: BERLIN TOWN CLERK – 240 KENSINGTON ROAD – BERLIN, CT 06037**

PLEASE PRINT

DO NOT MAIL CASH

<b>Death Certificate of:</b>	<b>Full Name of Deceased:</b>			SEX <input type="checkbox"/> M <input type="checkbox"/> F	<b>Date of Death *</b> (Month/Day/Year)
	First	Middle	Last		
	<b>Town of Death:</b>		<b>Date of Birth:</b> (Month/Day/Year)		<b>Place of Birth</b> (Town, State or Foreign Country)
<b>Father's Name:</b>		<b>Mother's Name:</b>		<b>If Married, Spouse's Name:</b>	

**PLEASE NOTE:** In accordance with C.G.S. §7-51A, for deaths occurring on or after July 1, 1997, on the surviving spouse or next of kin may obtain a copy of the death certificate with the decedent's Social Security number listed on the death certificate. The Funeral Director who was in charge of the disposition of the body may also obtain the death certificate with the Social Security number if the request for such certificate is within 60 days of the date of disposition. After this period, the Funeral Director may only receive death certificates with the Social Security number redacted. All other requesters, others than those approved by the Department of Public Health, will receive a certified copy of the death certificate without the decedent's Social Security number.

**PERSON MAKING THIS REQUEST: *IMPORTANT: Copy of Photo ID is required only for copies with Social Security numbers \****

**NAME:**

\_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Last Name

**ADDRESS:**

\_\_\_\_\_ Number \_\_\_\_\_ Street

**Town/City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Telephone No.:** \_\_\_\_\_ **E-Mail Address: (optional):** \_\_\_\_\_

**Relation to Deceased:** \_\_\_\_\_

**Signature: X** \_\_\_\_\_

**The fee for a copy of a Death Certificate is \$20.00 per copy.**

**Number of Copies Requested:** \_\_\_\_\_ **Amount Enclosed: \$** \_\_\_\_\_

**FEE: \$20.00 PER COPY. Remit a Check or Money Order made payable to the *Berlin Town Clerk* (\*along with copy of Photo ID – only for copies with Social Security numbers)**