

EAST HAVEN TOWN CLERK
 250 MAIN STREET
 EAST HAVEN, CT 06512
 (203) 468-3201

Application for Copy of Death Certificate

Today's Date: _____

Number of Certified Copies: _____

Legal Fee: \$20.00 each

Full Name of Deceased		
(First Name)	(Last Name)	
Date of Death		
(Month)	(Day)	(Year)
Town of Death :		
Name of Applicant :		
<small>(Person making the request)</small>		
Address of Applicant :		
City, State & Zip :		
Relationship to Deceased:		

<p>I. Acceptable Forms of ID II: For Mail Requests Only To purchase a copy of a Death Certificate you would need <u>one</u> of the following listed below:</p> <ul style="list-style-type: none"> Current Valid Drivers License Current Non-Driver ID issued by DMV Current Passport Current Valid Military <p>OR <u>two</u>(2) forms of the following:</p> <ul style="list-style-type: none"> Social Security Card Medical Insurance Card Current utility bill showing name and address Voter's Registration Card Car Registration showing your name and address 	<p>Please make sure to mail the completed request with the following requirements:</p> <ul style="list-style-type: none"> Form completed <u>Copy</u> of Acceptable Form(s) of ID. Please refer to Part I. Make checks payable to East Haven Town Clerk. Please provide Phone Number below. <p>Phone #: (_____)_____</p>
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WE DO NOT ACCEPT IDENTIFICATION THAT HAS EXPIRED.

METHODS OF PAYMENT: CASH OR CHECK.