

Request for a Certified Copy of a Death Certificate from the Southbury Vital Records Office

VS-39DTW Revised: 9/6/2011

PLEASE PRINT

DO NOT MAIL CASH

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

Person Requesting the Death Certificate:

Name: _____

First
Middle
Last Name

Address: _____

Number
Street
Town/City
State
Zip Code

(_____) _____ **Relationship To Deceased: **** _____
 Telephone No. E-Mail Address (optional)

Signature: X _____

**** Note:** Per CT law (C.G.S. §7-51A), for deaths occurring on or after July 1, 1997, only the Funeral Director and 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. All other requesters will receive a certified copy without the decedent's Social Security number.

If eligible, do you want the decedent's Social Security number on the copy of the certificate? No: _____ Yes: _____

One Time Fee Waiver for A Copy of a Veteran's Death Certificate:

Effective **10/1/2011**, CT law (C.G.S. §7-74 (c)) allows the **spouse, child or parent** of a deceased veteran to obtain **one (1)** free copy of the deceased's death certificate **provided the requester presents a copy of their valid Government issued photo I.D. and proof of their relationship to the deceased.** Examples of proof of relationship include a marriage certificate for a spouse, one's own birth certificate, if a child of the deceased, or the deceased's birth certificate, if a parent of the deceased.

Are you requesting the one time waiver of the \$20.00 fee and enclosing required documentation? No: _____ Yes: _____

The fee will be waived only if the veteran status is indicated on the death certificate.

The fee for a copy of a Death Certificate from the State or Town is \$ 20.00 per copy. Cash, money order or personal check are accepted. (Do not mail cash.) Checks made payable to the Southbury Town Clerk.

of Copies Requested: _____ **Amount Enclosed: \$** _____ **Fee Waiver Request:** _____

Bring or mail this request with a payment to Southbury Town Clerk, 501 Main Street South, Southbury, CT 06488

For other town contact information, refer to the Town Vital Records Directory on the Department of Public Health's Vital Records website at www.ct.gov/dph.com.

*** Note:** Copies of death or marriage certificates for events that occurred less than 4 years prior to the date of the request should be sent to the Vital Records office in the town of the event. Refer to our website at www.ct.gov/dph for town contact information.