

Date: \_\_\_\_\_

**Request for a Certified Copy of a Death Certificate from the Town/City of Death**

VS-39D Revised: 9-0-09

PLEASE PRINT

DO NOT MAIL CASH

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

PLEASE NOTE: In accordance C.G.S. §7-51A, for deaths occurring on or after July 1, 1997, only 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:**Name: \_\_\_\_\_  
First Middle Last NameAddress: \_\_\_\_\_  
Number Street

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

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

Relationship To Deceased: \_\_\_\_\_

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

The fee for a copy of a Death Certificate from the State or Town is \$ 20.00 per copy.

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

**PLEASE INCLUDE A COPY OF A PHOTO ID OF THE PERSON MAKING THE REQUEST.**

Make checks payable to: East Hampton Town Clerk  
20 East High Street  
East Hampton, CT 06424

For questions, please feel free to contact this office at (860) 267-2519 x 5.

\* Note: Copies of death or marriage certificates for events that occurred less than 4 months 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](http://www.ct.gov/dph) for town contact information.