Mail to: Portland Reg. of Vital Statistics, P.O. Box 71, Portland, CT 06480

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**

Death Certificate of:	**Full Name of Deceased:** First Middle Last		SEX ☐ M ☐ F	**Date of Death** * (Month/Day/Yr):
	Town of Death:	**Date of Birth** (Month/Day/Yr):	**Place of Birth** (Town, State or Foreign Country):	
	Father's Name:	**Mother's Name:**	**If Married, Spouse's Name:**	

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 Name

Address: _____
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. Personal checks are not accepted. Do not mail cash.

Number of Copies Requested: _____ **Amount Enclosed: $**_____

Please send this request with a *Postal Money Order* made payable to the *City or Town*

Mail this request to the City/Town (for town contact information, refer to our website at www.ct.gov/dph.com).

* **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 for town contact information.