

**SEND WITH COMPLETED APPLICATION FORM:** Please see the chart below for the list of documentation you are required to submit with your completed application form.

**City of New Haven Entitlement to Death Certificate**

Requester must present a valid ID

**SEND WITH COMPLETED APPLICATION FORM:** Legible copies of current valid identification (as listed in the chart below) are required for each certificate being requested. Expired IDs will not be accepted. Please include copies of the appropriate documents with your completed application form.

**Gather one (1) valid/unexpired primary forms of photo identification**

<b>Primary ID (1)</b>	Current valid driver's license	Current passport	Current non-driver ID issued by DMV	Current military ID card
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**OR**

**Gather two (2) valid/unexpired secondary forms of identification**

<b>Secondary ID (2)</b>	Social Security Card
	Voter Registration card
	Current utility bill showing name and address
	Car Registration showing your name and address



# Death Certificate Application



Please print and fill in all sections below.

FOR VITALCHEK USE ONLY:  
Order #:

## STEP 1: CERTIFICATE INFORMATION

<b>Full name of the deceased</b> First Name		Middle Name	Last Name	Suffix
<b>Date of death</b> (MM/DD/YYYY)	<b>Town where death occurred</b>		<b>Gender</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	
<b>Reason for Request</b>				

## STEP 2: APPLICANT INFORMATION AND SHIPPING ADDRESS

<b>Full Name of Applicant</b> First Name		Middle Name	Last Name	Suffix
<b>Your Street Address</b>		City	State	Zip Code
<b>Your Relationship to the Deceased Person</b>		<b>Your E-mail Address</b>		<b>Daytime Phone Number</b>
<b>Name and Address to Send Certificate</b> (if different than noted above) First Name		Middle Name	Last Name	Suffix
<b>Ship to address</b>		City	State	Zip Code
<b>Your Signature</b> (applicant)			<b>Date of Application</b>	

## STEP 3: COST

Number of copies	Qty	Price/ copy	Total
- First copy of Death Certificate		\$20.00 ea	\$
- Additional copies (maximum 10)		x \$20.00 ea	\$
<b>A Total for all copies above</b>			

Selected delivery method (choose one)		
UPS Next Day Air		\$17.50
UPS Alaska, Hawaii, Puerto Rico		\$25.50
UPS to Canada or Mexico		\$26.50
UPS Worldwide Expedited		\$37.25
U.S. Postal Service regular mail		\$ 0.00
<b>B Total for selected delivery</b>		

<b>C Total VitalChek Processing and Handling Fee</b> (non-refundable)	\$6.00
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**Total A + B + C =**

## STEP 4: PAYMENT INFORMATION

**Select Payment Method:** *Submit separate payment for each application*

American Express  
  DISCOVER  
  MasterCard  
  VISA  
  Credit Card  
  Personal Check  
  Money Order

**DO NOT SEND CASH**

**Credit Card Information:** (if paying by credit card)

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_  
 Cardholder's Signature \_\_\_\_\_ Date \_\_\_\_\_  
*Charges will appear on your Credit Card statement as: VCN\*CityofNewHaven*

**If paying by check or money order, make payable to VITALCHEK.**

## STEP 5: MAIL YOUR SIGNED AND COMPLETED FORM

**Please mail your completed form, along with copies of your ID and additional documentation (if required) to:**

Vital Record Mail Services  
 ATTN: New Haven Vital Records  
 P.O. Box 222130  
 El Paso, TX 79913

Please do not include a pre-paid express mail envelope with your request. Select a delivery method from the box to the left.

**For expedited order placement and processing, please visit [www.VitalChek.com](http://www.VitalChek.com).**