

STATE OF CONNECTICUT

TOWN OF: PROSPECT  
Registrar of Vital Statistics

Death Certificate Request Form - Page 1 of 2

PLEASE PRINT CLEARLY

**Step 1. Information about the person who died**

Full Name (First, Middle, Last): \_\_\_\_\_

Date of Death: \_\_\_\_\_ Town Where Death Happened: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Place of Birth (State or Country): \_\_\_\_\_

Mother's/Parent's Full Name: \_\_\_\_\_

Father's/Parent's Full Name: \_\_\_\_\_

If married when they died, Spouse's Full Name: \_\_\_\_\_

**Step 2. Your information**

Your Full Name: \_\_\_\_\_

Your Address: \_\_\_\_\_  
Street, Apt/Unit, City/Town, State, Zip Code, Country (if outside U.S.)

Your Phone Number: \_\_\_\_\_

Your Email (optional): \_\_\_\_\_

**Step 3. Your relationship to the person**

Check one box:

Any Person 18 years of age or older     Genealogist  
 Informant     Next of Kin     Surviving Spouse

**IMPORTANT:** If the person died on or after July 1, 1997, only the informant named on the certificate, the surviving spouse, and next of kin, can get a copy with the Social Security Number.

**Do you want the Social Security Number on the copy?**

No:

Yes:  If you check yes, you must show proof of identity and proof of your relationship.  
If you are the informant or surviving spouse, your name must be on the certificate.

If you do not provide proof, you will get a copy without the Social Security Number.

Sign Here: \_\_\_\_\_

**PLEASE SEE PAGE 2 (OR BACK SIDE OF THIS FORM) TO COMPLETE**

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#### **Step 4. Choose the type of copy and number of copies**

### **Veteran Fee Waiver:**

If the person was a veteran, the spouse, child, or parent can get **ONE** free copy.  
The death certificate has to say the person was a veteran.

You must include a valid photo ID and proof of relationship (examples: birth certificate shows you as child or parent, death certificate shows you as spouse)

Are you asking for the free copy?

No, then select the type of death certificate and number of copies below

Yes, One Long Form       Yes, One Short Form

If you apply for the **one** free veteran copy and want more copies, fill out another application for those and include your payment.

If you requested the one free copy. Skip to Step 6.

### Select Type of Copy and Number of Copies

Each certified copy is \$20.00.

**Long Form** Death Certificate      Number of long form copies: \_\_\_\_\_  
(Available for deaths from earliest date in town records to present)

**Short Form** Death Certificate      Number of short form copies: \_\_\_\_\_  
(Available for deaths from January 01, 2021, to present)

## Step 5. Payment

**Make a Money Order or Check payable to:**

**The Name of the City or Town Where You are Sending Your Request**  
(DO NOT MAIL CASH)

**Amount Enclosed: \$**

## **Step 6. Where to send your application**

Mail this form, payment, and documents to:

The town you are requesting the copy of the death certificate from.

You can look up the town contact information on the Department of Public Health's Vital Records

[Contact Us Page](#)

at [dph/vital-records/contact-us](mailto:dph/vital-records/contact-us)

City/Town Name:

Mailing Address:

City/Town, State, Zip Code