

STATE OF CONNECTICUT

**CITY OF MIDDLETOWN
Registrar of Vital Statistics**

Death Certificate Request Form - Page 2 of 2

Step 4. Choose the 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)

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

Yes, One Long Form **Yes, One Short Form**

Step 5. Payment

Make a [Money Order or Check](#) payable to:

MIDDLETOWN HEALTH DEPARTMENT
(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 at [dph/vital-records/contact-us](http://dph.vital-records/contact-us)

City/Town Name: **MIDDLETOWN HEALTH DEPARTMENT**
Mailing Address: **245 deKOVEN DRIVE, ROOM B17**
City/Town, State, Zip Code **MIDDLETOWN, CT 06457**