

Valerie Pudvah

Town Clerk

Town of Griswold

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Jaimee O'Neill-Eaton Assistant Town Clerk

DEATH CERTIFICATE REQUEST FO	<u>RM</u>	
Fee: \$20.00 Each		
Full name of deceased:		
Date of death:	Sex:	M F
Place of birth:	Date	of birth:
Father's full name:		
Mother's full name:		
If married spouse's name:		
PERSON REQUESTING DEATH CERTIFICATE:		
Full name:		
Address:	Phone:	
Relationship to deceased:	Intended use of certified copy:	
Applicant's Signature:		
** Note: Per CT law (C.G.S. §7-51A), for deaths occurring on or <u>after July 1, 1997</u> , only the Funeral Director and 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. All other requesters will receive a certified copy without the decedent's Social Security number.		
One Time Fee Waiver for A Copy of a Veteran's Death Certificate:		
Effective 10/1/2011, CT law (C.G.S. §7-74 (c)) allows the spouse, child or parent of a deceased veteran to obtain one (1) free copy of		

Effective 10/1/2011, CT law (C.G.S. §7-74 (c)) allows the spouse, child or parent of a deceased veteran to obtain <u>one (1)</u> free copy of the deceased's death certificate provided the requester presents a copy of their valid Government issued photo I.D. and proof of their relationship to the deceased. Examples o f proof of relationship include a marriage certificate for a spouse, one's own birth certificate, if a child of the deceased, or the deceased's birth certificate, if a parent of the deceased.

FOR REGISTRAR'S USE ONLY:

Date certified copy issued: Person issuing copy:

Form of identification used: