



## **DEATH CERTIFICATES**

The Village of Port Jefferson Clerk's Office (121 W. Broadway) maintains death records for individuals who passed away in the Village of Port Jefferson from January 1, 1964 to present.

The only individuals eligible to obtain a death certificate include:

- The surviving spouse of the decedent
- A parent of the person decedent\*
- A child or sibling of the decedent\* \*\*
- Other individuals who have:
  - Documented lawful right or a claim. An example would be an applicant who needs a death certificate to claim a benefit. Documentation would consist of a letter from the agency addressed to the applicant stating the requirement of a certified death certificate to process the claim. The death certificate copy will be sent directly to the agency or company that requires the document. Please provide the address and name of the contact person.
  - New York State Court Order

### **Identification Requirements: Applications must be submitted with copies of one of the following:**

One (1) of the following forms of valid photo ID:

- Driver's License
- DMV issued Non-Driver ID
- Passport
- US Military ID
- Employee photo ID plus a pay stub from current employer

**\* If the applicant's name on the ID differs from the information on the death certificate, a copy of the applicant's current marriage certificate or legal name change paperwork from the courts must accompany the request.**

**\*\* If applicant is child or sibling of decedent, a copy of the applicant's birth certificate is also required**

**ANY REQUEST FOR A DEATH CERTIFICATE TO BE MAILED TO A POST OFFICE BOX OR TO A THIRD PARTY MUST BE NOTARIZED.**

**Fee:** \$10.00 per certified copy requested.

- Payment by mail must be made by check or money order payable to "Inc Village of Port Jefferson".
- Payment in person must be made by credit card, check or money order payable to "Inc Village of Port Jefferson".
- Cash is not accepted.

## Application to Local Registrar for Copy of Death Record

**PLEASE COMPLETE FORM AND ENCLOSE FEE**

FEE: \$10.00 per copy or No Record Certification . Please do not send cash or stamps.  
Make check or money order payable to "Inc. Village of Port Jefferson".  
Please include a copy of photo I.D. as well as a self-addressed stamped envelope.

**PLEASE PRINT OR TYPE**

Name of Deceased First Middle Last			Date of Death or Period to be Covered by Search		
Name of Father of Deceased First Middle Last			Social Security Number of Deceased		
Maiden Name of Mother of Deceased First Middle Last			Date of Birth of Deceased Month Day Year		Age at Death
Place of Death Name of Hospital or Street Address Village, Town or City County					
Purpose for Which Record is Required					
What was your relationship to the deceased? _____					
In what capacity are you acting? _____					
If attorney, name and relationship of your client to deceased _____					
Signature of Applicant _____ Date _____					
Address of Applicant _____					

**PLEASE PRINT NAME AND ADDRESS WHERE RECORD SHOULD BE SENT**

Name _____		
Address _____		
City _____	State _____	Zip Code _____

Incorporated Village of Port Jefferson  
121 West Broadway  
Port Jefferson, NY 11777      Attention Registrar

(631) 473-4724