

<p>Copy of required ID must be included.</p> <p style="text-align: center;">Enclose \$10 per copy payable to: New Lebanon Town Clerk</p>	<p>Mail to:</p> <p style="text-align: center;">New Lebanon Town Clerk Vital Records Request P.O. Box 328 New Lebanon, NY 12125</p>
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CERTIFICATE INFORMATION

<p>Name of Deceased:</p> <p style="text-align: center;"><i>First Middle Last</i></p>	<p>Date of Death:</p> <p style="text-align: center;"><i>(mm/dd/yyyy)</i></p>
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<p>Name of Father of Deceased:</p> <p style="text-align: center;"><i>First Middle Last</i></p>	<p>Social Security Number of Deceased:</p>
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<p>Maiden Name of Mother of Deceased:</p> <p style="text-align: center;"><i>First Middle Last</i></p>	<p>Date of Birth of Deceased:</p> <p style="text-align: center;"><i>(mm/dd/yyyy)</i></p>	<p>Age at Death:</p>
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Place of Death:

Street Address Village, town or city County

<p>Purpose for which Record is Required:</p>	<p>What is your relationship to person whose record is required?</p>
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<p>What is your relationship to person whose record is required? (If self, state "SELF".)</p>	<p>If attorney, give name and relationship of your client to person whose record is required:</p>
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Submit documentation of a lawful right or claim if you are not the spouse, parent or child of the deceased. An example of a lawful right or claim would be a death record needed by the applicant to claim a benefit. Documentation would consist of a copy of a court order or an official letter verifying that a copy of the requested death record is required from the applicant in order to process a claim.

Applications being submitted through the mail require a notarized signature along with copy of ID.

<p>Signature of Applicant:</p> <p>_____</p>	<p>Date:</p> <p>_____</p>	<p>\$10 x _____ Copies = \$ _____</p>
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<p>Address of Applicant: (PRINT)</p> <p>_____</p> <p><i>(Applicant's Name)</i></p> <p>_____</p> <p><i>(Street)</i></p> <p>_____</p> <p><i>(City) (State) (Zip)</i></p> <p>Telephone No.: ()</p>	<p>Please print or type the name and address where record should be sent if different than applicant's:</p> <p>_____</p> <p><i>(Name)</i></p> <p>_____</p> <p><i>(Street)</i></p> <p>_____</p> <p><i>(City) (State) (Zip)</i></p>
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<p>Notary (if required):</p>	<p>Types of Acceptable Identification:</p> <ul style="list-style-type: none"> Driver's license Non-driver's license Passport Other government issued photo-ID
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