

Town of Amsterdam

Death Certificate Request

A copy of a death record for a person who died in the Town of Amsterdam can be requested by coming in person to our office or by mail. Death records are not public records and NYS Public Health Law protects their confidential nature. The deceased's spouse, parent, child, siblings or lawful representative with proper identification can request certified copies. The deceased child or sibling must provide a copy of their birth certificate along with proper identification. All other persons must have proof of why they need the death certificate as well as identification.

Who is eligible to get a copy of a death certificate?

- The spouse, parent, child or sibling of the deceased
- Other people who have a:
 - documented lawful right or claim
 - documented medical need
 - New York State Court Order

If you are not the spouse, parent, child or sibling of the deceased you must document a lawful right or claim. For example, you may need a death certificate to claim a benefit. You would need an official letter from the agency saying you need the death record to process the claim.

What identification needs to be submitted by the applicant?

Application must be submitted with copies of either A or B:

- A. One of the following forms of valid photo-ID:
 - Driver's license
 - State-issued, non-driver photo-ID card
 - Passport
 - U.S. Military-issued, photo-ID

- B. Two of the following showing the applicant's name and address:
 - Utility or telephone bill
 - Letter from a government agency dated within the last six months

Fee is \$10.00 for each certified Death Certificate. We accept checks, money order, and/or cash.

BY MAIL

A certified copy of a death record of a person who died in the Town of Amsterdam also can be requested by mail. Complete the enclosed application, mail along with a copy of your Identification(s) and a \$10.00 check or money order, for each certified death certificate, made payable to the Town of Amsterdam to the following address: Town of Amsterdam, 283 Manny's Corners Road, Amsterdam, NY 12010.

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.

money order - NO personal checks.

PLEASE PRINT OR TYPE

Name of Deceased			Date of Death or Period to be Covered by Search		
First	Middle	Last			
Name of Father of Deceased			Social Security Number of Deceased		
First	Middle	Last			
Maiden Name of Mother of Deceased			Date of Birth of Deceased		Age at Death
First	Middle	Last	Month	Day	Year
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 _____					

COMPLETE FOR DEATHS OCCURRING AS OF JANUARY 1, 1988

_____ Number of copies requested with confidential cause of death
_____ Number of copies requested without confidential cause of death

PLEASE PRINT NAME AND ADDRESS WHERE RECORD SHOULD BE SENT

Name _____
Address _____
City _____ State _____ Zip Code _____

mail to:

DOH-294A (6/2000)



TOWN OF AMSTERDAM
TOWN OFFICE BUILDING
283 MANNY'S CORNERS ROAD
AMSTERDAM, NEW YORK 12010