

TOWN OF DEER ISLE

Application for copy of

Death Certificate

Death Record Requested

Full Name of Decedent _____

Date of Death _____

Applicant *(Applicant **must** have proof of ID, see reverse)*

Name _____

Address _____

City, State, Zip _____

Phone or Email _____

In order to obtain a copy of this record, you must be one of the following (check the one that applies):

Person named on the record.

Descendant of person named on record

Parent of person named on the record.

Genealogist DHHS I.D. # _____

Legal guardian or authorized representative of person named on the record.

Spouse of person named on record.

Attorney of person named on the record

Federal/State/Local Government Agency or Public School Official.

By my signature below, I swear/affirm that the information above is true and correct.

Applicant Signature _____ Date _____

Number of copies requested

\$15 for 1st copy, \$6 for each additional copy.
Make checks payable to "Town of Deer Isle"

IMPORTANT INFORMATION ON REVERSE

Clerk's Initials _____

You must provide proof of identity with this application.

Either provide one of these:

___ Driver's License

___ Passport

___ Government Issued Picture I.D.

Or two of these:

___ Utility Bill

___ Social Security Card

___ Bank Statement

___ DD 214 (Military Discharge)

___ Vehicle Registration

___ Hospital; birth worksheet

___ Income Tax Return/W2

___ License/rental agreement

___ Personal Check w/address

___ Pay Stub

___ Previously issued vital record

___ Voter Registration Card

___ Request letter from Government Agency

___ Disability Award from SSA

___ Department of Corrections I.D. card

___ School or Employee Photo I.D.

___ Medicaid/Medicare Card

___ Other (items that include name address and date of birth): _____

Mailing Application?

Sign & Date Application.

Include copies of your required proof of identification.

Include appropriate payment. and self-addressed stamped envelope.

Make check payable to:
Town of Deer Isle

Mail to:
Town of Deer Isle
PO Box 46
Deer Isle, ME 04627

Please Note:

We do not retain copies of proof provided or any specific numbers.

In addition to proof of identification:

- ~Domestic Partners must provide proof of registration of domestic partnership.
- ~Related applicants must provide proof of lineage.
- ~A spouse must provide proof of marriage.
- ~Attorneys must provide a signed, notarized release from family.
- ~Genealogists must provide a state issued I.D. card

Questions?

Call the Town Clerk at (207)348-6060
or email deerisleclerk@gmail.com.
Office Hours: M, T, W, F- 9am-noon
Th- 4pm- 7pm