

APPLICATION FOR A CERTIFIED COPY OF A DEATH RECORD

WARREN TOWN CLERK, WARREN TOWN HALL, 514 MAIN STREET, WARREN, RI 02885

COMPLETE ALL ITEMS 1 – 5 BELOW. PLEASE PRINT CLEARLY.

1. Fill in the information below for the person whose death record you are requesting:

Full Name _____

Date of Death _____ Place of Death (*city/town/hospital name*): _____

Name of Spouse (*if married*): _____

Mother's Full Maiden Name: _____

Father's Full Name: _____

2. I am applying for the death record of: (*complete one of the following*)

My Parent My Spouse My Child My Grandparent

Other Relative (*specify your relationship*): _____

My Client — I am an attorney representing: _____

The name of the law firm is: _____

My Client — I am an insurance company representative: _____

The name of the insurance company is: _____

Another Person (*specify your relationship*): _____

3. Why do you need this record?

We ask this question so that we can supply you with a certified copy that will be suitable for your needs.

Probate Social Security Vets Benefits Property Title

Foreign Government Other Use (*specify*)

4. Copies cost \$20.00. Any additional copies of *this record* purchased *this same day* cost \$15.00 each.

How many do you want? _____

5. I hereby state that the information supplied in item #2 above is true and that I am not in violation of Section 23-3-28 of the General Laws of RI (*printed on the second page of this form*).

Please Sign _____ Date Signed _____

Signature Of Person Completing This Form

Print Your Name _____ Phone # _____

Print Your Address _____

Street or Mailing Address

City / Town

State

Zip Code

SECTION 23-3-28 OF THE GENERAL LAWS

I understand that Section 23-3-28 of the General Laws of Rhode Island provides penalties for either of the following violations:

Any person who willfully and knowingly makes any false statement in a report, record, certificate or application for an amendment thereof, or who willfully and knowingly supplies false information intending that such information be used in the preparation of any of the such report, record, or certificate, or amendment thereof...shall be punished (if convicted) by a fine of not more than one thousand dollars (\$1,000) or imprisoned not more than one (1) year or both.

BELOW THIS LINE FOR OFFICE USE ONLY

Type of Picture ID: _____ ID Number: _____ ID Issued By: _____
VS-82B (Rev. 06/29/06)

State/Local File # _____ Amt. rec'd _____ Rec't # _____ Date Sent _____ Initials _____

Birth Death Marriage

Number of first copies: _____

Number of additional copies: _____

Number of searches: _____

Additional years searched: _____

FOR STATE USE ONLY — Delayed Filing: _____ Correction: _____ P/L: _____ A: _____