

Town of Plainville

Death Certificate Certified Copy Request Form

(Please print)

Person's full name _____

Date of death _____

Person making this request:

Name _____

Address _____

Signature _____ Date _____

Relation to person named in certificate _____

Type of copy requested: () Full Size **\$20.00**

PLEASE ATTACH A COPY OF A PHOTO ID.

Mail to : Plainville Town Clerk, One Central Square, Plainville, CT 06062

Make check payable to : Plainville Town Clerk.