

City of Northampton, Massachusetts
DEATH CERTIFICATE REQUEST FORM

You must submit the following with this form:

1. Payment of \$15 per copy **CASH or MONEY ORDER ONLY** (We DO NOT accept personal checks. Money Orders should be made out to "City of Northampton")
2. A self-addressed & stamped envelope for us to send your record back to you.

Mail to: Northampton City Clerk
City Hall, Room 4
210 Main Street
Northampton, MA 01060

Requests submitted through the mail will be processed on the date they are received. Please note certain records are restricted to only parties listed on the record and will require photo identification.

Information of person on the record of death:

| | | |
|---------------|--------|------|
| First | Middle | Last |
| Date of Death | | |

Exact location of death, if known:

| | |
|------------------------------|-----------|
| Hospital, Nursing home, etc. | City/Town |
|------------------------------|-----------|

Requestor's Information:

| | |
|---|--|
| Phone Number | Email address |
| Signature of Requester (WRITTEN - NOT TYPED) | Relationship to Name on Record (ex: Sibling, Descendant, etc.) |

Mailing Address:

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