



## REQUEST FOR DEATH CERTIFICATE

The following form needs to be completed in its entirety in order to apply a Death Certificate.

<b>Deceased's Surname (<i>Last Name</i>):</b>	<b>Deceased's Maiden Name (<i>If Applicable</i>):</b>
<b>Deceased's First Name:</b>	<b>Deceased's Middle Name (<i>If Applicable</i>):</b>
<b>Deceased's Date of Birth:</b>	<b>Deceased's Place of Birth (<i>Parish</i>):</b>
<b>Date of Death:</b>	<b>Parish where death occurred:</b>
<b>Applicant's Last Name, First Name and Middle Name:</b>	
<b>Applicant's Cellular No.:</b>	
<b>Applicant's E-Mail Address:</b>	<b>Applicant's Return Address:</b>
<b>Fee US\$8.00.</b> ( <i>US\$7.00 fee and US\$1.00 for regular return postage. Make <b>International Postal Order</b> payable to: <b>Deputy Registrar General</b>.</i> )	

### **FORWARD APPLICATION AND FEE TO:**

#### **DEPUTY REGISTRAR GENERAL**

Births, Deaths and Marriage Certificates

Ministry of Health

Ministerial Complex

Botanical Gardens

Tanteen

St. George's

GRENADA, W. I.

**Tel. (473) 440-2806**