

# **TO OBTAIN A DEATH CERTIFICATE BY MAIL**

**PLACE OF DEATH MUST BE IN MIDDLE TOWNSHIP.**

*Death Certificates are NOT public records.  
Only immediate family members or the Executor/Executrix  
of the Estate may obtain a copy of the record.*

You may print and complete the attached application with the required identification, or send a written request with the following information:

- Full Name of Deceased**
- Date of Birth**
- Date of Death**
- Father's Name of Deceased**
- Mother's Maiden Name of Deceased**

## **ALSO INCLUDE:**

A **MONEY ORDER** made payable to **Middle Township**, in the amount of **\$10.00** per copy and a self-addressed stamped envelope (address must match address on identification).

The forms of identification that are required are:

- Photo Driver's License (valid with current address) **and** proof of relationship if not listed on the record (i.e.: marriage license of spouse, birth certificate of child showing parents' names).

If person has no driver's license, we will accept TWO of the following forms:

- Auto or health insurance card with name and current address
- Utility bill with name and current address
- County identification with a second form of identification with name and address
- Voter registration with one of the above identifications

Questions? Please give us a call (609) 465-8722.

Our office is open Monday through Friday from 8:30am – 4:00pm, Closed for Holidays.

**Township of Middle  
Office of Vital Statistics  
33 Mechanic Street  
Cape May Court House, New Jersey 08210**

# APPLICATION – DEATH CERTIFICATE

Township of Middle  
 Office of Vital Statistics  
 33 Mechanic Street  
 Cape May Court House, New Jersey 08210  
*Suzanne M. Stocker, Registrar*

COST: \$10.00 per Certified Copy  
 Cash or Money Order Only

*Please see attached document "To Obtain a Death Certificate by Mail" for complete instructions and acceptable identification.*

Name of Applicant			Date		
Street Address			Relationship		
City	State	Zip	Telephone #		
Why is a Certified Copy Being Requested?					
<b>Does Certified Copies Need To Show Cause of Death?</b>					

Full Name of Person at Time of Death		# of Copies Needed	
City, Town or Township of Death <b>Middle Township</b>		County Of Death <b>Cape May</b>	
Date of Death	Date of Birth	Place were they Passed	
Father's Name		Mother's Maiden Name	

<b>A u t h o r i z a t i o n</b>	Date: _____		<b>File#</b>
	I, _____, _____ to	(Applicant) (Applicants Relationship to Deceased)	
	_____ who passed away on _____	(Name of Deceased) (Date of Death)	
	hereby authorize the issuance of a certification of the death record of the decedent, disclosing the cause of death section. The reason why the cause is required is _____		
	I certify that the above information, supplied by me, is true. I am aware that I am subject to punishment if I have falsely supplied the above information.		
	_____ (Signature)		