**Request for Death Certificate**

Please print out this form and return to:  
Town Clerk’s Office  
116 Main St., Suite 108  
South Hadley, MA 01075

Requests submitted through the mail will be processed on the date they are received.

**Full name of the Decedent**

<table>
<thead>
<tr>
<th>First</th>
<th>Middle</th>
<th>Last</th>
</tr>
</thead>
</table>

**Date of Death**

<table>
<thead>
<tr>
<th>Month</th>
<th>Day</th>
<th>Year</th>
</tr>
</thead>
</table>

**Exact Location of this Death**

Hospital, Nursing Home, home address, etc  
City or Town

**Signature of Requester**

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**Daytime telephone number**

<table>
<thead>
<tr>
<th>Area Code</th>
<th>Number</th>
</tr>
</thead>
</table>

**Return Mailing Address**

<table>
<thead>
<tr>
<th>Street</th>
<th>Town/City</th>
<th>Zip Code</th>
</tr>
</thead>
</table>

- Certified copies cost $10.00
- Please enclose a self-addressed, stamped envelope.
- Payment may be made by check or money order payable to Town of South Hadley. (Please do not mail cash)
- **NOTE:** Some records are restricted or impounded and access may be denied. Please enclose copy of your driver's license.