

# Request for Death Certificate

**Please print out this form, fill it in, include payment, and mail to:**

Holden Town Clerk, Town Hall, 1196 Main Street, Holden, MA 01520-1092

**Requests received by mail will be processed on the date received.**

Full name of person on the record of death

\_\_\_\_\_  
First Middle Last

Date of Death \_\_\_\_\_

\_\_\_\_\_  
Month Day Year

Exact Location of this Death \_\_\_\_\_

\_\_\_\_\_  
Hospital, Nursing Home, etc.

Signature of Requester \_\_\_\_\_

\_\_\_\_\_  
Daytime telephone number

\_\_\_\_\_  
Area code number

Return Mailing Address

\_\_\_\_\_  
\_\_\_\_\_  
*Fee is \$10.00. Personal checks will be accepted by in-state residents. Out-of-state requests must be by money order or certified bank check. Make personal check, money order or certified bank check payable to "**Holden Town Clerk**" and enclose a self addressed stamped envelope.*