

# Death Certificate Application

Office Use Only - Our File #

APPLICANT'S INFORMATION – PLEASE PRINT

Surname		First and Other Given Names			
Mailing Address (Civic # or PO Box)					
City		Province/State		Country	Postal Code
Home Number		Daytime Contact Number	Mobile Number		Email Address
Applicant's Signature				Date (MMDDYY)	

DEATH CERTIFICATE DETAILS – INCLUDE FRENCH SYMBOLS IF APPLICABLE

Date of Death	Month	Day	Year	Place of Death – Specify the name of the City, Town, or Village	Province	Nova Scotia
Surname				First Name		
Second and Other Given Names					<input type="checkbox"/> Male	<input type="checkbox"/> Female

YOUR RELATIONSHIP TO THE DECEASED

Mother/Parent   
  Father/Parent   
  Spouse   
  Other – Please indicate relationship

Reason certificate required:

CERTIFICATES REQUESTED, FEES AND PAYMENT METHOD – PLEASE INDICATE TYPES AND NUMBER OF CERTIFICATES REQUESTED

	Total Qty.	Fee(s)
<input type="checkbox"/> Short Form		\$33.00
<input type="checkbox"/> Long Form (Restricted, subject to Vital Statistics Act)		\$39.90
<input type="checkbox"/> Photographic Print of Registration (Restricted, subject to Vital Statistics Act)		\$39.90
<input type="checkbox"/> Courier Service (Optional) – this fee provides expedited shipping of certificate(s).		\$20.00

**METHOD OF PAYMENT** (Please ✓ box)

Cash (in person at counter only)   
  Debit Card   
  Cheque   
  Money Order   
  Visa   
  MasterCard   
  American Express

PAYEE INFORMATION – Complete section below

Name as shown on Credit Card, Debit Card, Cheque, or Money Order \_\_\_\_\_

Mailing Address (if different than above) \_\_\_\_\_

Signature \_\_\_\_\_

Credit Card information to be removed as soon as the credit card payment is processed and the approval number received.

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PLEASE DO NOT PROVIDE CREDIT CARD NUMBER AND EXPIRY DATE IF PAYMENT IS IN PERSON AT COUNTER.

Credit Card Number \_\_\_\_\_ Expiry Date \_\_\_\_\_

## IMPORTANT INFORMATION

### 1) Who is eligible to apply for a Death Certificate?

Short form death certificates may be released to any person who has a valid reason for requiring the document.

Long form death certificates may be released to:

- a) Next of kin of the deceased.
- b) Executor or trustee of an estate, when the detailed death certificate is required to settle an estate.

Photographic prints of the original registration containing cause of death are released only to next-of-kin, an executor of an estate in selected circumstances, with authorization of the Minister, or a court order.

### 2) Information provided on Death Certificate:

- a) Short Form Certificate: Given and surname, sex, date of death, age, place of death, registration number, registration date, and date certificate issued.
- b) Long Form Certificate: The Long Form Death Certificate contains all the above information and the following, if recorded on death record: date of birth, place of birth, residence, occupation, marital status, name of spouse, names of parents, attending physician, funeral director, disposition, place of disposition, name of informant, address, and relationship.
- c) Photographic Print of Registration: The photographic copy of the original death registration that contains the medical cause of death.

### 3) Certificate sizes:

- a) Short Form dimensions are 12.5 cm wide by 17.5 cm high.
- b) Long Form dimensions are 12.5 cm wide by 17.5 cm high.
- c) Photographic Print of Registration dimensions are 21.5 cm wide by 35.5 cm high.

### To Avoid Delay:

- See section 1 above to be sure you are eligible to apply.
- Be sure your address and contact information are correct and clearly written.
- Complete all sections **in full** to avoid delays in processing your application. If you have left any of the fields blank, include a letter explaining why.
- It is against postal regulations to send cash through the mail. Payment in Canadian funds should be forwarded by cheque, bank draft, or money order made payable to the Minister of Finance.
- If you are paying by credit card, include the name of the cardholder that appears on the card, mailing address, signature, card number, and expiry date. **NOTE:** Only Visa, MasterCard, and American Express are accepted.
- If payee is different from applicant and payment is being made by debit card, cheque, or money order, include name of payee and mailing address.

**Privacy Information:** The information on this form is collected under the authority of the Vital Statistics Act (Revised Statutes of Nova Scotia 1989, chapter 494).

### Contact Us

#### Mailing Address:

Vital Statistics  
PO Box 157  
Halifax, Nova Scotia  
B3J 2M9 Canada

#### Enquiries:

Local: (902) 424-4381  
Toll Free: 1-877-848-2578 (Nova Scotia only)  
Fax: (902) 450-7313  
E-mail: [vstat@novascotia.ca](mailto:vstat@novascotia.ca)

#### Or Visit Our Office:

300 Horseshoe Lake Drive  
Bayers Lake Business Park  
Halifax, Nova Scotia  
B3S 0B7 Canada

**Hours:** 8:30 am to 4:30 pm Monday to Friday, except holidays.

**Website and ordering online:** [novascotia.ca/sns/access/vitalstats.asp](http://novascotia.ca/sns/access/vitalstats.asp)