

Town of Bethel
PO Box 1660
Bethel, ME 04217
(207) 824-2669

NON-REFUNDABLE SEARCH FEE

Death Certificate

Full Name of Decedent: _____

Date of Death: _____

Place of Death: _____

Applicant Name: _____

Applicant Address: _____

Indicate your Relationship to the person on requested record below:

- Spouse
- Registered Domestic Partner
- Parent
- Funeral Director
- Informant
- Gaurdian
- Descendant
- Attorney of person on record
- Genealogist ID # _____

By signing below, I swear/affirm that the information above is true and correct.

Applicant Signature: _____

Today's

Date: _____

\$15 for 1st copy, \$6 for each additional copy

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Proof of identity of applicant:
Applicant must provide one of these:

- Driver's License
- Passport
- Government issued picture I.D.

OR two of these:

- Utility Bill
- Bank statements
- Income tax return
- Personal check w/ address
- Previous issued vital record
- letter from government agency requesting record (DHHS, WIC)
- Department of corrections I.D. card
- Social security card
- DD 214
- Hospital; birth worksheet
- License/rental agreement
- Paystub
- W-2
- Voter registration card
- Disability award from USA
- Other

Establishing eligibility to acquire records:

- Relatives must provide Proof of lineage
 - Domestic Partners must provide proof of registration of domestic partnership
 - Attorney's must provide a signed, notarized release from family
 - Genealogists must proved a state-issued card
 - Do not retain copies of proof**
- Or note any specific numbers**

CERT# _____ #of copies _____

ID # _____