

## Affidavit to Request Certified Copy of Death Certificate

### Affidavit for Use with Dual Citizenship Application Requests

FOR OFFICE USE

Ref. # \_\_\_\_\_

I, \_\_\_\_\_, swear or affirm under penalty of perjury that the statements made herein and any accompanying documentation are true and correct to the best of my knowledge and belief.

I reside at \_\_\_\_\_  
(Street Address) (City) (State) (ZIP Code)

and I am requesting a certified copy of the death record of \_\_\_\_\_ who  
(Full Name of Deceased - First Middle Last)

was born on \_\_\_\_\_ and who died on \_\_\_\_\_  
(MM/DD/YYYY) (Date of Death or Period to Be Searched)

The death occurred in the City, Town or Village of \_\_\_\_\_ in New York State.  
(City, Town or Village Where Death Is Believed to Have Occurred)

A certified copy of this record is required for the purpose of obtaining citizenship with \_\_\_\_\_  
(Name of Country)

I am related to the Deceased as follows: (Show name and relationship of descendents from the deceased to yourself. For example, I, Joseph Kelly, am the son of Mary McCormick, who is the daughter of Simon Green, who is the son of the deceased, Alice Faillugh.)

I also swear or affirm that this affidavit is being made for the sole purpose of obtaining the death certificate for the purpose stated above. (Submit photocopies of the citizenship requirements as well as any birth and/or marriage records necessary to document your relationship to the deceased.)

► \_\_\_\_\_  
Signature of Applicant

Below to be completed by Notary Public

STATE OF \_\_\_\_\_ }  
COUNTY OF \_\_\_\_\_ } SS:

Subscribed and sworn to  
(affirmed) before me this \_\_\_\_\_ day

of \_\_\_\_\_, \_\_\_\_\_

► \_\_\_\_\_  
Notary Public