

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 descendants 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

Notary Public