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Health

人口□□□ (Office of Vital Records)
 125 Worth Street, CN-4, Room 133
 New York, N.Y.10013-4090

□参□下面的内容以及第3□和第4□的□明与相关□用
SEE INSTRUCTIONS AND APPLICABLE FEES BELOW AND ON PAGES 3 AND 4

**死亡证明申请
 DEATH CERTIFICATE APPLICATION**

(□用英文正楷填写尽可能多的信息。□交用其他□言填写的申□表可能需要□□的□□来□理。)
 (Please print clearly and fill out as much information in English as you can. Forms submitted in other languages might take longer to process.)

1. 死亡时的姓氏 / LAST NAME AT TIME OF DEATH		2. 名字 / FIRST NAME		3. <input type="radio"/> 女性 / FEMALE <input type="radio"/> 男性 / MALE		
4. 死亡日期 / DATE OF DEATH <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 月 日 年 MM DD YYYY		5. 如果您不知道具体的死亡日期 / IF YOU DON'T KNOW THE EXACT DATE OF DEATH 开始搜索 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 结束搜索 BEGIN SEARCH 月 日 年 END SEARCH 月 日 年 MM DD YYYY MM DD YYYY				
6. 死亡地 / PLACE OF DEATH		7. 行政区 / BOROUGH 曼哈顿 <input type="radio"/> 布朗士 <input type="radio"/> 布鲁克林 <input type="radio"/> 皇后区 <input type="radio"/> 史丹顿岛 <input type="radio"/> MAN <input type="radio"/> BRONX <input type="radio"/> BKLYN <input type="radio"/> QUEENS <input type="radio"/> SI <input type="radio"/>		8. 年龄 / AGE	9. 您需要几份副本? / HOW MANY COPIES DO YOU NEED?	10. 您是否需要示例信函? / DO YOU NEED A LETTER OF EXEMPLIFICATION <input type="radio"/> 是 / YES <input type="radio"/> 否 / NO
11. 配偶或同居伴侣姓名 / SPOUSE OR DOMESTIC PARTNER'S NAME		12. 最新地址 / LAST KNOWN ADDRESS		13. 死亡时的职业 / OCCUPATION OF DECEASED		
14. 父亲 / 家长姓名 / FATHER / PARENT'S NAME			15. 母亲 / 家长婚前姓名 / MOTHER / PARENT'S NAME BEFORE MARRIAGE			
16. 社会安全号码 / SOCIAL SECURITY NUMBER			17. 证明编号 (如果知道) / CERTIFICATE NUMBER (if known)			
18. 您为什么需要这份证明? / WHY DO YOU NEED THIS CERTIFICATE?			19. 您和已故者是什么关系? / WHAT IS YOUR RELATIONSHIP TO DECEASED?			

请在下方用英文正楷填写您的邮寄和联系信息 / PLEASE PRINT YOUR MAILING AND CONTACT INFORMATION CLEARLY BELOW

姓名 / NAME		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 日间联系电话 / DAYTIME PHONE NUMBER 区号 / Area Code 电话号码 / Telephone Number	
街道地址 / STREET ADDRESS 公寓编号 / APT. NO.			
市 / CITY 州 / STATE 邮编 / ZIP CODE		电子邮箱地址 / E-MAIL ADDRESS <input type="text"/>	

20. 您是否需要死亡原因? / DO YOU NEED THE CAUSE OF DEATH? <input type="radio"/> 是 / YES <input type="radio"/> 否 / NO 只有当您与已故者的关系如下方所列才可获得死亡原因: You may only obtain cause of death if your relationship to the deceased is listed below: 请勾选相应框 / Please check the appropriate box <input type="radio"/> 配偶或同居伴侣 / Spouse or Domestic Partner <input type="radio"/> 父母或子女 / Parent or Child <input type="radio"/> 兄弟姐妹 / Sibling <input type="radio"/> 祖父母 / Grandparent <input type="radio"/> 孙子女 / Grandchild <input type="radio"/> 负责处理死亡证明的人员 / Person in control of disposition on death certificate		21. 费用 / FEES 美元 15 x _____ 份数 _____ 美元 \$15 per copy x copies 认证副本费用包括一项连续两年的搜索费用 Cost of certified copy includes a two consecutive year search 超过两年的搜索费用为 3 美元 x _____ 年限 _____ 美元 \$3 for each extra year searched x years 随附总额 _____ 美元 Total Amount Enclosed: 如果记录未存档, 将发放经核证的“NOT FOUND STATEMENT”(“未找到记录声明”) IF RECORD IS NOT ON FILE, A CERTIFIED “NOT FOUND STATEMENT” WILL BE ISSUED	
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<p>22. 客户签名。通过邮寄方式提交的签名必须经过公证 CUSTOMER SIGNATURE. IF BY MAIL MUST BE NOTARIZED</p> <p>通过在下方签名，我声明我是代表我本人的个人。我确认此表格中的信息完整而准确。此外，我认可如果伪报我的身份或冒充其他人的身份（包括伪造签名）将属轻罪，违反者同时将处以最高达 2,000 美元的罚款。</p> <p>By my signature below, I state I am the person whom I represent myself to be herein. I affirm the information within this form is complete and accurate. In addition, I acknowledge that misstating my identity or assuming the identity of another person including forging a signature may subject me to a misdemeanor and violators may also be subject to a fine of up to \$2,000.</p>	<p>FOR NOTARY PUBLIC USE ONLY (仅用于公证)</p>				
<p>_____ 签名 (必需) Signature (required)</p>	<p>_____ 日期 Date</p>	<table border="1" style="width: 100%;"> <tr> <td data-bbox="813 138 1252 212"> <p>APPLICATIONS SUBMITTED BY MAIL MUST BE NOTARIZED</p> <p>STATE OF _____</p> <p>COUNTY OF _____</p> <p>SUBSCRIBED AND SWORN BEFORE ME: THIS _____ DAY OF _____, 20 _____</p> </td> <td data-bbox="1252 138 1537 422" rowspan="2"> <p>NOTARY PUBLIC SEAL</p> </td> </tr> <tr> <td data-bbox="813 394 1252 422"> <p>_____ NOTARY PUBLIC SIGNATURE</p> </td> </tr> </table>	<p>APPLICATIONS SUBMITTED BY MAIL MUST BE NOTARIZED</p> <p>STATE OF _____</p> <p>COUNTY OF _____</p> <p>SUBSCRIBED AND SWORN BEFORE ME: THIS _____ DAY OF _____, 20 _____</p>	<p>NOTARY PUBLIC SEAL</p>	<p>_____ NOTARY PUBLIC SIGNATURE</p>
<p>APPLICATIONS SUBMITTED BY MAIL MUST BE NOTARIZED</p> <p>STATE OF _____</p> <p>COUNTY OF _____</p> <p>SUBSCRIBED AND SWORN BEFORE ME: THIS _____ DAY OF _____, 20 _____</p>	<p>NOTARY PUBLIC SEAL</p>				
<p>_____ NOTARY PUBLIC SIGNATURE</p>					
<p>邮寄申请不接受信用卡付款。请以支票或汇票方式（抬头为“NYC Department of Health and Mental Hygiene”）进行支付。如果您来自其他国家，请寄送一张以一家美国银行为付款人的国际汇票或支票。不接受邮寄或面交现金。</p> <p>Credit cards are not accepted for mail-in orders. Please make your check or money order payable to the NYC Department of Health and Mental Hygiene. If from a foreign country, send an international money order or check drawn on a U.S. bank. Cash is not accepted by mail or in person.</p>					
<p>如需快速安全地申请死亡证明，请访问 WWW.NYC.GOV/VITALRECORDS ORDER DEATH CERTIFICATES QUICKLY AND SECURELY AT WWW.NYC.GOV / VITALRECORDS</p>					

关于死亡证明的重要信息

- 如果您是已故者的配偶、同居伴侣、家、子女、兄弟姐妹、祖父母或子女，或如果您有利益得此份文件（[下方文件要求](#)），您可以得已故者的死亡证明。
- 所有死亡证明将通寄送达，通常在 2-4 周内寄出。如果需要加急并提供了证明，您可以要求加急服务，您将会在 5-7 个工作日内收到证明。
- 取死亡证明而改信息（包括造名）属罪，反者每次将处以最高达 2,000 美元的款。
- 提交假冒身份属于犯罪，将反者提起。
- 下方身份要求、用和其他重要信息。
- ID 要求可能会有更。

申请市死亡证明的 3 种方式

- 在： www.nyc.gov/vitalrecords，使用信用卡、借卡或支票行。 “只有配偶、非婚姻同居伴侣、父母、兄弟姐妹、祖父母、子女或理死亡证明的人（提供料的人）才可在提交”。
- 来： 前往位于下曼哈区的 125 Worth Street，从 Lafayette Street（无障碍通道）或 Centre Street 入口入。我的工作周一至周五上午 9:00 至下午 3:30。早上排队的人最少。
- 寄： 通寄提交的申请必在公证人员面前行名。 将您的申请寄至 125 Worth Street, CN-4, New York, NY 10013。 必在您寄的支票或票中附上回地址和票。您也需要提供所要求身份的影印件和其他必要文件（[下方](#)）。

已故者的配偶、同居伴侣、父母、兄弟姐妹、祖父母、子女，或理死亡证明的人（提供料的人） 申请死亡证明的身份证明（ID）要求

我接受以下任意身份证明，前提是其中包含您的照片和名且未期：

- 或非的身份
- IDNYC 市民身份
- 照
- 政府身份
- 附工的工

如果您无法提供上述料，我可接受：

- 附放文件的含照片的服刑人身份
- 下方注明的两不同文件示您的姓名和地址，前提是文件日期在去 60 天以内，且我将以寄方式放死亡证明
 - 水或
 - 您收到的政府官方寄料

如果您未能提供以上所要求的料，您可送件至 nycdohvr@health.nyc.gov 咨其他相关信息和。

与已故者无关的申请人的文件要求

如果您与已故者无关，需确您有利益取其死亡证明。如果您是房的法定代理人、保或的一方，或您可明其他司法或其他合法用途，可得死亡证明。

- 保
- 嘱
- 行存折或
- 房契据
- 其他能明您利的文件

如果您无法提供所要求的文件，致 311 或 1-212-639-9675（如果您不在市）向我求助。

IMPORTANT DEATH CERTIFICATE INFORMATION

- You can obtain a death certificate if you are the spouse, domestic partner, parent, child, sibling, grandparent or grandchild of the decedent, or if you establish your right to obtain this document (*see documentation requirements below*).
- All death certificates are mailed, usually within 2-4 weeks. If there is an urgent need, and documentation is provided, you can request expedited services and you will be called to pick up the certificate in 5-7 business days.
- Falsifying information, including forging a signature, to obtain a death certificate is a misdemeanor and violators may also be subject to a fine of up to \$2,000 per violation.
- Submitting fraudulent identification is a crime and violators are subject to prosecution.
- Please see below for identification requirements, fees and other important information.
- ID requirements are subject to change.

3 WAYS TO ORDER A NEW YORK CITY DEATH CERTIFICATE

- **Online:** Visit www.nyc.gov/vitalrecords to order using a credit card, debit card or electronic check. “Only spouses, domestic partners, parent, siblings, grandparent, grandchild, or person in charge of the disposition (informant) may submit orders online”.
- **Walk-In:** Go to 125 Worth Street in Lower Manhattan and use the Lafayette Street (handicapped accessible) or Centre Street entrances. We are open Monday through Friday 9:00AM – 3:30PM. Lines are shortest in the morning.
- **By Mail: Applications submitted by mail must be signed in the presence of a Notary Public.** Mail your application to 125 Worth Street, CN-4, New York, NY 10013. Be sure to include a self-addressed, stamped, envelope with your check or money order. You also will need to provide a photocopy of the required identification and any necessary documentation (*see below*).

Identification (ID) Requirements including the deceased’s spouse, domestic partner, parent, sibling, grandparent, grandchild, or person in charge of the disposition (informant)

We accept any of the following, **IF** it includes your photo, your signature and is unexpired:

- Driver’s License or Non-driver’s ID Card
- IDNYC Municipal ID
- Passport
- Government ID
- Employment ID with pay stub

If you don’t have any of the above, we also accept:

- Inmate photo ID with release papers
- Two different documents as indicated below if they show your name and address and are dated within the past 60 days, we will MAIL the certificate
 - Utility or telephone bills
 - Official government mail that you have received

If you do not have the items required above, you may email nycdohvr@health.nyc.gov for additional information and options.

Documentation Requirements for applicants NOT related to the deceased

If you are **not** related to the deceased, you need to establish your right to obtain a death certificate. You may obtain a death certificate if you are the legal representative of the estate, a party with a property right to protect or assert, or if you can specify another judicial or other proper purpose.

- Insurance Policy
- Will
- Bank Book or statement
- Property Deed
- Other document showing entitlement

If you are unable to provide the required documents, ask us for help by calling 311 or 1-212-NEW-YORK if you are outside of New York City.