

APPLICATION FOR DEATH CERTIFICATE  
State of New Hampshire  
City of Keene

Date Requested: \_\_\_\_\_

*Please Print*

Name of Deceased: \_\_\_\_\_

Date of Death: \_\_\_\_\_

City of Death: \_\_\_\_\_

Number of certificates requested: \_\_\_\_\_

Type of certificate\* (please circle one): Plain With Manner With Cause

Signature of Requestor: \_\_\_\_\_

Relationship to person on certificate: \_\_\_\_\_

**PLEASE BE SURE TO INCLUDE WITH THIS REQUEST A PHOTOCOPY OF PICTURE IDENTIFICATION TO CONFIRM THE I.D. OF THE REQUESTOR.**

**A FEE OF \$15.00 (dollars) IS REQUIRED BY LAW FOR THE SEARCH OF THE FILES FOR ANY ONE RECORD. ADDITIONAL COPIES OF THE SAME RECORD ORDERED AT THE SAME TIME IS \$10.00 (dollars) EACH. ANY PERSON SHALL BE GUILTY OF A CLASS B FELONY IF HE/SHE WILLFULLY AND KNOWINGLY MAKES ANY FALSE STATEMENT IN AN APPLICATION FOR CERTIFIED COPIES OF A VITAL RECORD. (RSA 126:24)**

**MAIL YOUR REQUEST TO:** CITY CLERK'S OFFICE  
3 WASHINGTON STREET  
KEENE, NH 03431

**\*EXPLANATION OF CERTIFICATE TYPES AVAILABLE:**

**PLAIN:** Will list no information relative to the manner or cause of death of the decedent

**WITH MANNER:** Will list manner of death only (i.e. Natural, Accidental, etc...)

**WITH CAUSE:** Will list the manner of death as well as related causes as determined by the pronouncer (i.e. Pneumonia, Myocardial Infarction, Arteriosclerosis, Diabetes, etc...)