

PUERTO RICO MAIL IN DEATH CERTIFICATION APPLICATION

ouer								
Instructions	 Step 1: Establish eligibility. (Refer to Eligibility information). Step 2: Complete Death Certification Application Form in in its entirety, including the applicant's signature section. Step 3: Provide a photocopy of the applicant's valid identification on both sides. All photocopies are required to be clear and legible. Received applications which don't include an acceptable identification will not be processed. (Refer to Identification Requirements) Step 4: Include copy of necessary documentation in order to establish kinship and/or use of married surname. Step 5: Include the correct fee according to the requested certification. If a record isn't on file or if the submitted application doesn't comply with the requirements established in these instructions, a certified Not Found Statement will be issued. The application fee will not be refunded. (Refer to Payment and Fee information) Step 6: Mail in Application Form, Money Order, pre-addressed envelope, and all necessary documentation to the following address: Demographic Registry of Puerto Rico Fernandez Juncos Station PO Box 11854 San Juan, PR 00910 							
rmation	Eligibility In accordance with the definition of "interested party" as stated by Act No. 24 of April 22 nd , 1931, as amended, known as the Puerto Rico Registry Act: Spouse as listed on the death certification Parent(s) of the spouses as listed on the marriage certificate Child of the deceased of 18 years of age or older (child must submit a copy of their birth certificate if not born in Puerto Rico) Legal representative of one of the aforementioned parts (must comply with the instructions issued in Circular Letter 1-2020) Heir (must provide a certified copy of the Testament of Declaration, which may be subject to a validation procedure in Puerto Rico) NOTE: Federal and State Agencies may obtain a Death Registration Verification which will include limited information of the death record. This issued document does not establish an identity, therefore it's not considered a legal substitute of a Death Certification. (<i>Refer to Circular Letter 2 2019</i>). Identification Requirements for an eligible applicant when requesting a marriage certification The submitted identification must be current, possess the name of the identified person, their photo, signature, issuance and expiration date. If the married last name is used in the identifications: Passport							
INTO	 Identification Card issued by a state or an United States territory (DMV or DTOP) Payment and Fees for a marriage certification <u>Computer Certification (Short Form)</u> \$12.00 each copy Photocopy of the Original Certificate (Long Form) First copy \$17.00 Additional copies requested at the same time \$12.00 each Fee Exceptions The Veteran's surviving spouse is exempt from the fee when the requested certification is for official uses. The spouse must provide a copy of the requested certification. (Circular Letter OPVELA-2015-02) Acceptable Payment Method Money Order addressed to the Secretary of Treasury of Puerto Rico. Personal checks are not accepted. The Demographic Registry of Puerto Rico isn't responsible for navments made in cash lost, misdirected or not delivered. Don't Send 							
Information	The following are the only acceptable forms of identifications: Passport Driver's License issued by a state or an United States territory Identification Card issued by a state or an United States territory (DMV or DTOP) Payment and Fees for a marriage certification <u>Computer Certification (Short Form)</u> Photocopy of the Original Certificate (Long Form) • \$12.00 each copy • First copy \$17.00 • Additional copies requested at the same time \$12.00 each Fee Exceptions • The Veteran's surviving spouse is exempt from the fee when the requested certification is for official uses. The spouse must pro a copy of the in DD-214 Form or other supporting evidence proving the applicant is a veteran and document attesting the off use of the requested certification. (Circular Letter OPVELA-2015-02) Acceptable Payment Method							

Departamento de Salud

GOBIERNO DE PUERTO RICO

Registro Demográfico

Model RD 227 English Rev. 02/2020

□ Approved □ Denied PUERTO RICO MAIL IN MARRIAGE CERTIFICATION APPLICATION

PLEASE REFER TO INSTRUCTIONS, ELIGIBILITY INFORMATION, IDENTIFICATION REQUIREMENTS, PAYMENT AND FEES ON PAGE 1

PART 1 – AP	PLICAN	FINFORMATION											
NAME			MIDDLE NAME		FI	FIRST LAST NAME			SECO	SECOND LAS NAME			
						<u> </u>							
RESIDENTIAL					Р	OSTAL							
ADDRESS					A	DDRESS							
	City State or Country			Zip Code		-	City		State	State or Country		Zip Code	
Phone Number	()		Mobile Number	()			Email Address						
ELEGIBILITY	in accorda	nce to with the defin	ition of an "interested	party" as stated by	Act. No	. 24 of April 2	2 nd , 1931, as a	amende	d, known as th	ne Puerto	Rico Registry	/ Act	
□ Spouse	listed on	death record		Mother	🗆 Fa	Father Child Legal Representative Heir							
PART 2 – APPLICATION PURPOSE (A purpose must be selected based on the requested amount of certifications)													
LIFE INS			SOCIAL SECURITY				RRIAGE LICENSE	callons					NG.
			RETIREMIENT		5010 110		RITIONAL ASSIST	ANCE		<u> </u>		ROOLLDI	10
										L			
PART 3 – DE	ATH RE	CORD INFORMA	MIDDLE NAME		FIRST LAST NAME				SECOND LAST NAME				
TVUIL			model www.						020		une -		
	DATE OF D)FATH	AGE AT TIME OF	MUNICIPALITY	WHERE		FUNERAL	HOME			SEX	SOCIAL	SECURITY
MONTH	DAY	YEAR	DEATH	DEATH OCC			1 01121112					0000.12	02001
WONTH	DAT	TEAR									ASCULINE EMENINE		
PARENT'S		□ FATHER						2					
INFORMATION	N:												
		E FORM OF IDE		PART 5 - AP									
Driver's Lic			NTIFICATION	By signing this				αlam	the identified	applican	nt in Part I. In	addition I	affirm the
		ssued identification of	ard	information con	itained f	therein is con	nplete and acci	urate. F	ailure to comp	ly with th	ne instructions	and requi	rements of
Because the form may be a second to be a							alification for the identity of a						
giving							minal Code Ac						5211-217,
Include a photostical	Signature	Signature Date											
Identification				Х									
	TYPE OF CERTI			Photocon	w of the Origi	nal Ca	tificato Eoo						
Computer Certification Fee (Short Form) Number of Copies						Photocopy of the Original Certificate Fee (Long Form) Number of Copies							
□ \$12.00 each	сору		□ First copy \$17.00										
Puerto Rican	Veteran sp	ouse (Include eviden	s on page 1)	\square Additional copies requested at the same time \$12.00 each									
		•		Puerto Rican Veteran spouse (Include evidence – Refer to instructions on page 1)									
The application fee will not be refunded. If a record isn't found a certified Not Found Statement will be issued.													
FOR OFFICIAL USE OF THE DEMOGRAPHIC REGISTRY ONLY													
Date mail was		ana di isian		Payment Method Included	,		Numbering:	íy:		\$			
Date received		vee who receiv								▶ ■ Not Found Statement			
correspondenc	e: '	,	C	Documentation					Slatement				
Included docur	nentation	as part of the applica	S	Security Form Numbering Issuance Date:									
Applicant's birth certificate Applicant's marriage certificate Applicant's marriage certificate						1.		2.		3.			
Copy of applicant's ID Copy of applicant's ID						4. 5.							
□ Other:						Employee Name:							
						Cignatura:							
			1	Signature:									

Para el estatus de su solicitud e información adicional, comunicarse al (787) 765-2929 Ext. 6131 o al correo electrónico seguimientosolicitudexpcorreo@salud.pr.gov Registro Demográfico • PO BOX 11854 San Juan, Puerto Rico 00910-1854 •www.salud.gov.pr• (787)765-2929