



Request for Death Certificate Form

City of Lynn

Lynn City Hall, Room 201
3 City Hall Square
Lynn, MA 01901

FEE: All certified copies are **\$10.00**

Did death occur in Lynn? _____

If not Lynn, where? _____

Name of deceased: _____

Date of Death: _____

Daytime Telephone Number: _____

Number of copies requested: _____

*Please send the following items with your request:

- Self-addressed stamped envelope
- Check or Money Order payable to City of Lynn for exact amount (\$10.00 per copy)

Please allow 10 to 14 days for request