



APPLICATION FOR DEATH CERTIFICATE OR DEATH REGISTRATION PHOTOCOPY/EXTRACT

To save time, order death certificate(s) securely online and pay with credit card. Go to: https://ecos.vs.gov.bc.ca.

MAILING ADDRESS AND CONTACT INFORMATION OF APPLICANT

Form with fields: PRINT your name, address and identifying information clearly. This portion is used when mailing your certificate or correspondence. FOR OFFICE USE ONLY: AFS# LAST/FAMILY NAME GIVEN NAME(S) MAILING ADDRESS CITY/TOWN/VILLAGE, PROVINCE/STATE, COUNTRY POSTAL/ZIP CODE HOME PHONE (INCLUDE AREA CODE) WORK PHONE (INCLUDE AREA CODE AND EXTENSION)

DECEASED'S INFORMATION

Form with fields: LAST/FAMILY NAME GIVEN NAME(S) AGE SEX DATE OF DEATH MONTH (E.G. FEB) DAY YEAR PLACE OF DEATH (CITY/TOWN/VILLAGE) BRITISH COLUMBIA PERMANENT RESIDENCE BEFORE DEATH (CITY/TOWN/VILLAGE, PROVINCE/STATE, COUNTRY) PLACE OF BIRTH (CITY/TOWN/VILLAGE, PROVINCE/STATE, COUNTRY)

YOUR RELATIONSHIP TO THE EVENT

IMPORTANT: Before submitting your application, verify that you are eligible to request a Death Certificate or Death Registration Photocopy/Extract. If fewer than 20 years have passed since the date of the death, only persons listed on page 2 of this form under the heading, "Who Can Apply for a Death Registration Photocopy/Extract?" may request a certified copy.

Form with fields: YOUR RELATIONSHIP TO THE EVENT: (If necessary, include written authorization from an eligible applicant.) REASON DOCUMENT(S) REQUIRED: YOUR SIGNATURE:

FEES — DEATH CERTIFICATES AND DEATH REGISTRATION PHOTOCOPIES/EXTRACTS

Table with 5 columns: Qty., Description of Death Documents, Cost Based on Delivery Type (Mail, Courier\*), Estimated Date of Delivery (Mail, Courier\*). Rows include Death Certificate, Death Registration Photocopy/Extract, and Death Registration Photocopy/Extract with Medical Certificate of Death (cause of death)\*\*.

\* Courier delivery is not made to post office boxes, apartment complexes, homes that use Super Box (community) mailboxes, or basement suites. Instead, a delivery notice with instructions is left at the mailing address and the envelope is delivered to the nearest postal outlet. ID and signature are required upon pick up. \*\*Medical Certificate of Death will only be released to eligible applicants. Please see reverse for further information.

PAYMENT METHOD

Cheque or Money Order payable to the Minister of Finance. (Postdated cheques are not accepted.)

Credit Card: Please bill my: Visa MasterCard American Express

Interac/Cash payments can be made in person at a Service BC Centre. Visit www.servicebc.gov.bc.ca to find a location near you.

Card Holder Name: PRINT card holder name as shown on credit card

Card Holder Signature:

Amount Enclosed \$

Credit Card Number: Expiry Date:

Note: Credit card information is not retained. Upon authorization of the payment request, all credit card information is destroyed.

# IMPORTANT INFORMATION

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## WHO CAN APPLY FOR A DEATH CERTIFICATE?

- Death certificates may be released to any person who has a valid reason.

## WHO CAN APPLY FOR A DEATH REGISTRATION PHOTOCOPY/EXTRACT?

- The Executor of Estate — proof of Executorship required.
- A parent, sibling, child, spouse, grandparent, or grandchild of the deceased — proof of relationship required.
- Anyone, if the event is over 20 years old.
- A person who is authorized by a court order to be issued the copy or extract.
- Any other person who satisfies the registrar general concerning the good faith of the person's cause for requiring the certificate — letter required.

## WHO QUALIFIES TO APPLY FOR A DEATH REGISTRATION PHOTOCOPY/EXTRACT WITH THE MEDICAL CERTIFICATE OF DEATH (CAUSE OF DEATH)?

- Immediate family members, restricted to parent, sibling, child, spouse, grandparent, or grandchild of the deceased — proof of relationship required.
- Anyone, if the event is over 20 years old.
- A person authorized by a court order.
- Any other person who satisfies the registrar general concerning the good faith of the person's cause for requiring the certificate — letter along with supporting evidence required.

## INFORMATION PROVIDED

- **Death Certificates** are printed in UPPER CASE and contain the following information:  
Name, date of death, age, sex, place of death, birthplace, residence, registration number, and certificate issuance date.
  - **Certified Electronic Extract of a Death Registration\* (Issued for all death events occurring on or after January 1, 2000)**  
This is an extract of the death information on file with the Agency issued for death events occurring on or after January 1, 2000.
  - **Certified Copy of a Death Registration\* (Issued for all death events occurring prior to January 1, 2000)**  
This is a copy of the original death registration. Death registrations are rarely needed for reasons other than personal records.
- \* If you require a certified copy or certified extract of a death registration, please visit our website at [www.gov.bc.ca/vitalstatistics](http://www.gov.bc.ca/vitalstatistics) or contact Customer Service at **250 952-2681** (Victoria & Outside B.C.) or toll-free at **1 888 876-1633** (within B.C.) for eligibility information.

## OTHER SERVICES — Genealogy Certificate (B.C. RECORDS ONLY)

An application for a genealogy certificate is available from our website, or contact us by telephone (see Contact Information below).

## FEES

Fees listed on page one of this form are determined under the *Vital Statistics Act Regulation* and are subject to change without notice.

## TO AVOID PROCESSING DELAYS:

- Verify that you are eligible to request a Death Certificate or Death Registration Photocopy/Extract.
- Print your complete address and telephone number clearly on your application.
- Complete all sections in full. If there is information you do not know, include the following three items with your application:
  1. A brief letter explaining why the information is unknown to you.
  2. Photocopies of two pieces of identification (one piece should be picture ID).
  3. Written verification of your identity on official letterhead from a physician, lawyer, notary public, or religious representative who has known you for at least two years.
- Enclose the correct payment in Canadian funds. Payments made by cheque or money order should be made payable to the Minister of Finance. Do not postdate cheques or send cash by mail. A service charge of \$30.00 will be levied on all cheques not honoured by the payee's financial institution.

## CONTACT INFORMATION

**Mailing Address:** Vital Statistics Agency, PO Box 9657 Stn Prov Govt, Victoria BC V8W 9P3

**Telephone:** 250 952-2681 (Victoria & Outside B.C.), 1 888 876-1633 (within B.C.)

**Web:** [www.gov.bc.ca/vitalstatistics](http://www.gov.bc.ca/vitalstatistics)

Apply for services in person at any Service BC Centre. Visit [www.servicebc.gov.bc.ca](http://www.servicebc.gov.bc.ca) for your nearest location.

## FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY

This information is collected by the Vital Statistics Agency under section 26(c) of the *Freedom of Information and Protection of Privacy Act* and will be used to fulfill the requirements of the *Vital Statistics Act* for the release of death information. Should you have any questions about the collection of this personal information, please contact:

Manager, Vital Statistics Agency, 250 952-2681, PO Box 9657 Stn Prov Govt, Victoria BC V8W 9P3.