

APPLICATION FOR DEATH CERTIFICATE OR REGISTRATION PHOTOCOPY/EXTRACT

📌 To save time, order death certificates securely online and pay with credit card. Go to: <https://ecos.vs.gov.bc.ca>.

CONTACT INFORMATION AND MAILING ADDRESS

| | | | | |
|---|--------------------------------|---|--|--|
| PRINT your name, address and identifying information clearly. This portion is used when mailing your certificate or correspondence. | | | FOR OFFICE USE ONLY: AF5# | |
| Surname | | Given Name(s) | | |
| Residential Address | | City/Town/Village, Province/State, Country | | |
| Postal/Zip Code | Home phone (include area code) | | Work phone (include extension and area code) | |
| <input type="checkbox"/> I authorize the Vital Statistics Agency to mail correspondence and/or legal documents to the person/organization listed below. (Authorization required if mailing address is different from residential address.) | | | | |
| Company and/or Individual Name | | Mailing Address (if different from residential address) | | |
| City/Town/Village, Province/State, Country | | | Postal/Zip Code | |

DEATH DETAILS

| | | | | |
|---|------------------|-----|---|------------------------------------|
| Surname | | | | |
| Given Name(s) | | | Age | Sex |
| Date Of Death | Month (e.g. FEB) | Day | Year | Place Of Death (City/Town/Village) |
| | MMM | DD | YYYY | |
| Permanent Residence Before Death (City/Town/Village, Province/State, Country) | | | Place of Birth (City/Town/Village, Province/State, Country) | |

**BRITISH
COLUMBIA**

YOUR RELATIONSHIP TO THE EVENT

Your Relationship to the Event: _____
(If necessary, include written authorization from an eligible applicant.)

Reason Certificate Required: _____

Your Signature: **X** _____

DEATH CERTIFICATES AND REGISTRATION PHOTOCOPIES/EXTRACTS

| Qty. | Description of Death Documents | Cost Based on Delivery Type | | Estimated Date of Delivery | |
|------|--|-----------------------------|---------|---|--|
| | | Mail | Courier | Mail | Courier* |
| | Death certificate - Lists the deceased's full name, age, sex, date and place of death, place of birth, province/state and/or country of residence, registration number, and date of registration. Size: 21.6 cm x 17.8 cm. | \$27 | \$60 | Prints in 2 - 5 business days; add mailing time from Victoria to you. | Prints next business day; add courier delivery time from Victoria to you. |
| | Registration Photocopy/Extract - Certified copy or extract of the death registration. | \$50 | \$60 | Prints within 20 business days; add mailing time from Victoria to you. | Prints next business day; add courier delivery time from Victoria to you. |

* 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.

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: **X** _____

Amount Enclosed \$ _____

Credit Card #: _____ 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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TO AVOID DELAY:

- **Verify that you are eligible** to request a certificate (see Section 3 below).
- **Write your complete address and telephone number clearly on your application.** To authorize the Vital Statistics Agency to send correspondence and the requested documents to a mailing address that is different from your residential address, you **MUST** check the box and provide your signature beside the statement provided on page one. **Without authorization, we cannot process your request.**
- **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 orders 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.

1) FEES

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

2) 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 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.

3) WHO QUALIFIES TO APPLY FOR A DEATH CERTIFICATE?

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

OTHER SERVICES - Genealogy Certificate (B.C. RECORDS ONLY)

To obtain an application for a genealogy certificate, visit our website or contact us by telephone.

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

Apply for services in person at any Service BC Centre. Visit 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.