



Department of Justice & Public Safety

Vital Statistics Program

ACCESS TO VITAL STATISTICS DATA – REQUEST FOR STATISTICS FORM

This information is required in order to process your request for statistical data provided through Subsection 36 and 37(2) of the *Vital Statistics Act*, R.S.P.E.I. 1988, Cap. V-41.

Date of Request:	Date Needed/Required:
CONTACT INFORMATION	
Name of Organization/Business/Department:	
Contact Person for this request: Position Title: Address: Telephone: Fax:	
STATISTICAL INFORMATION BEING REQUESTED	
Type of Event Record(s) being requested (birth, death, marriage, change of name, etc.)	
Describe the kind of information being requested (yearly, quarterly, month, county, provincial, etc.)	
Compile by Calendar or Fiscal year	
Identify the specific year(s) of data being requested	
PURPOSE OF STATISTICAL INFORMATION BEING REQUESTED	
Why do you need the information?	
What are you going to do with the information/how will it be used?	

If you need more space, please attach additional information to this form.
 Phone: (902)838-0880 Fax: (902) 838-0883 Email: vsMontague@gov.pe.ca