

Fee: Monroe County - \$30.00 / Other Districts - \$10.00 per certified copy or No Record Certification

Identification Requirements: Application *must* be submitted with copies of either A or B.
(Note: Copy of Passport required if request is made from a foreign country that requires a U.S. Passport for travel.)

- A. One (1) of the following forms of valid photo-ID: **-OR-** B. Two (2) of the following showing the applicant's name and address:
- Driver license
 - Non-driver photo-ID card
 - Passport
 - Employment ID
 - Utility or telephone bills
 - Letter from a government agency dated within the last six (6) months

Name of Deceased: _____ Social Security No. of Deceased: _____
First Middle Last

Date of Death or Period to be Covered by Search: (mm/dd/yyyy) _____ Date of Birth of Deceased: _____ Age at Death: _____
From To mm / dd / yyyy

Maiden Name of Mother of Deceased: _____ Death Certificate No.: (If known) _____
First Middle Maiden Last

Name of Father of Deceased: _____ Local Registration No.: (If known) _____
First Middle Last

Place of Death: _____
Name of Hospital or Street Address Village, town or city County

Number of Copies Requested: (For deaths occurring as of January 1, 1988 specify with or without confidential cause of death.)
Copies requested with confidential cause of death _____ Copies requested without confidential cause of death _____ Total number of copies requested _____

Purpose for which Record is Required: _____ What is your relationship to person whose record is required? _____

In what capacity are you acting? _____ If attorney, give name and relationship of your client to person whose record is required: _____

If you are not the parent or child of the deceased or the spouse of the deceased at the time of death, you must submit documentation of a lawful right or claim.

Signature of Applicant: _____
Date Signed: _____
Month Day Year

Address of Applicant: _____
(Applicant's Name)

(Street)

(City) (State) (Zip)

Telephone No.: () _____

FOR REGISTRAR'S USE ONLY
(Photocopy ID and attach to application form)

Type of ID:
 Driver License
Issuing state: _____
Expiration date: _____
Number: _____
 Other ID, Specify
Number: _____
Type: _____
Number: _____
Type: _____