



200 E. Berry St. ♦ Suite 360 ♦ Fort Wayne, IN 46802

Phone: (260) 449-7147 ♦ Fax: (260) 449-3015 ♦ www.allencountyhealth.com

# APPLICATION FOR DEATH RECORD

**Certified Death Record** (\$15 each)  
(Stamped with Official Seal; Can be used for legal purposes)

**Non-Certified Copy** (\$2 each)  
(Not stamped with Official Seal; Not for legal purposes)

# of Copies: \_\_\_\_\_

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**PAYABLE BY: CASH\*\*\* OR MONEY ORDER** (NO PERSONAL CHECKS ACCEPTED)  
\*\*\*NOT RESPONSIBLE FOR CASH SENT IN MAIL

Any and all charges for services, records, documents, and/or certificates are your sole responsibility and are to be paid in full upon application (unless billed at a later date upon agreement for bulk orders for certain entities, in which case they are due at the time of invoicing). In the event any legal proceeding must be instituted to recover the amount due, the Fort Wayne-AlLEN County Department of Health shall be entitled to recover the cost of the collections, including reasonable attorney fees.

*Please provide the following information regarding the record you are seeking:*

- To request a **Certified** copy of a death record, you must complete all items below AND show PHOTO ID.
- To request a **Non-Certified** copy of a death record, the items marked with an \* must be completed at a minimum.

\*NAME OF DECEASED \_\_\_\_\_

\*DATE OF DEATH \_\_\_\_\_ PLACE OF DEATH (City/State) \_\_\_\_\_

PURPOSE FOR WHICH RECORD IS REQUESTED \_\_\_\_\_

YOUR RELATIONSHIP TO DECEASED \_\_\_\_\_

\*

\_\_\_\_\_  
Printed Name of Requestor

\_\_\_\_\_  
Signature of Requestor

\_\_\_\_\_  
Date

(Your signature certifies you agree to the note above regarding fees and charges/collections)

ADDRESS \_\_\_\_\_ PHONE: \_\_\_\_\_  
(street) (city) (state) (zip)

16-37-1-8 Indiana Vital Statistics laws clearly state that a local health officer may only issue a certified copy of a death record if he/she is satisfied that the applicant has a direct interest in the record. **Photo ID is required such as a driver's license or state ID.**

ID

*For Office Use Only*