

Please email requests to: [vitals@monongaliacountyclerk.com](mailto:vitals@monongaliacountyclerk.com)



## **APPLICATION FOR DEATH CERTIFICATE**

(RECORDS AVAILABLE FROM 1853 TO THE PRESENT)

COST: \$5.00 PER CERTIFICATE CASH, CREDIT CARD OR MONEY ORDER – **NO CHECKS – ID REQUIRED**

NAME AT DEATH:

**First Middle Last**

DATE OF DEATH:

GENDER: MALE FEMALE

FATHER'S FULL NAME

**First Middle Last**

MOTHER'S FULL **MAIDEN** NAME:

**First Middle Maiden Last**

FUNERAL HOME:

NUMBER OF COPIES REQUESTED:

REASON FOR REQUEST:

(ITEM MUST BE COMPLETED FOR CERTIFICATE TO BE ISSUED)

PLEASE STATE YOUR RELATIONSHIP TO THE DECEDENT:

(YOU MUST BE AN IMMEDIATE MEMBER OF THE FAMILY, EXECUTOR, OR ATTORNEY FOR THE ESTATE)

NAME OF APPLICANT:

**First Middle Last**

SIGNATURE OF APPLICANT:

DATE: PHONE NUMBER: EMAIL:

MAILING ADDRESS TO MAIL CERTIFICATE:

CREDIT CARD TRANSACTION FEE: 2.5% OF TRANSACTION AMOUNT OR MINIMUM OF \$2.00

TYPE OF CREDIT CARD: VISA MASTER CARD AMERICAN EXPRESS DISCOVER

CREDIT CARD NUMBER: EXP: CVC:

NAME ON CREDIT CARD:

BILLING ADDRESS OF CREDIT CARD HOLDER: