



Monroe County Health Department

Request for a Death Record

Certified Copy \$16.00

• Genealogy Copy \$15

Name of Deceased:

First

Middle

Last

Date of Death: / /
Month Day Year

Reason Record is Needed: _____

Documentation for Proof of Relationship/Legal Vested Interest:

Relationship to Deceased. Please Check Appropriate Line.

☐ Spouse at time of death

☐ Sibling (Must provide birth certificate to prove relationship, unless born in Monroe County.)

☐ Parent of deceased

☐ Informant (Listed on certificate)

☐ Funeral Home

☐ Adult child of deceased (Must provide copy of your birth certificate to prove relationship, unless born in Monroe County.)

☐ Law Firm/Insurance Agency (Must provide additional request on office letter head with ID.)

☐ Other _____
(Must provide proof of relationship or legal vested interest. Examples on back.)

Print Name of Applicant: _____

Signature: _____

Address: _____ City: _____

State: _____ Zip: _____ Phone Number: _____

For Office Use Only

DC Copy ☐ Gen ☐ Total: \$ _____

Cash _____ Check _____ M/O _____ Card _____

Local # _____ Receipt # _____

ID _____ Exp _____

Valid Forms of Identification

Primary Documentation (must be current and valid – only one needed)

- Driver's License or State Issued ID Card
- Military ID
- Passport
- Department of Corrections ID (issued within the last 6 months)
- Matricula Consular Card

Examples of Proof of Relationship/Legal Vested Interest:

- If you are listed as the Spouse on the certificate, you will only need to provide a copy of your ID
- If you are listed as the Informant on the certificate, you will only need to provide a copy of your ID
- Birth Certificate that shows you are the child of the deceased
- Birth Certificate of shared child with the deceased that lists both parents
- Birth Certificate that shows you share at least one parent with the deceased
- Obituary that has you listed as a relative
- Marriage License, if you are not the spouse listed on the death certificate
- Divorce Decree
- Property Title or Deed that lists both you and the deceased
- Financial Account that lists both you and the deceased
- For a Genealogy copy, the record must be over 75 years old and you do not need to show proof of relationship

Mail Order Checklist

- ☐ Completed and signed Death Certificate Application
- ☐ Check or money order made payable to Monroe County Health Department for \$16 per copy requested
- ☐ Photocopy of applicant's identification
- ☐ Photocopy of check signer's identification if different from applicant
- ☐ Self-addressed stamped envelope
- ☐ Proof of relationship or legal vested interest

Mail to:

Monroe County Health Department
119 W. 7th Street
Bloomington, IN 47404

****We are not responsible for lost or undeliverable mail****

You can also order certificates online at VitalChek.com (additional fees apply) or come in person to our office.

Please call 812-349-2542 with any questions.