



Death Certificate Application

To obtain any Minnesota death certificate, you must fill out the information on this form. You must also pay the required fee and provide acceptable identification. Minnesota Statutes, section 144.225, subdivision 7, and Minnesota Rules, part 4601.2600, subpart 5.

Information about the deceased person - used to find the requested death record

Deceased Person	First name		Middle name		Last name		Name suffix	
	Date of death [MM/DD/YYYY]	Date of birth [MM/DD/YYYY]	Or Age	City of death		County of death		State MN
	First parent's name		Second parent's name		Spouse on record (if any)			

What kind of death certificate do you want?

- Certified death certificate *with* cause of death information
Certified death certificate *without* cause of death information (only for records 1997 to today)
Certified VA death certificate for Veterans Affairs-related purposes

Requester - person completing this application – by law you must supply this information

Requester	Requester name (please print)				Date of birth (MM/DD/YYYY)		
	Mailing address		Apt/Unit #	City	State	ZIP Code	
	Daytime phone		Email				

MANDATORY — Mark the boxes that describe your relationship to the deceased person:

- ☐ A child of the subject.
- ☐ The parent of the subject.
- ☐ The sibling of the subject.
- ☐ The spouse on the record.
- ☐ The grandparent of the subject.
- ☐ The grandchild of the subject.
- ☐ Subject's personal representative: the certified death certificate is required for the administration of the estate.
- ☐ Successor of the subject; the certified death certificate is required for the administration of the estate.
- ☐ Trustee of a trust; the certified death certificate is required for the proper administration of the trust.
- ☐ Determination or protection of a personal or property right (**You must submit documentation showing this relationship**)
- ☐ Adoption agency — to complete post-adoption search (**Employee ID required**)
- ☐ Attorney — I represent the subject, or a person listed in items 1-10 above.
My **Minnesota** Attorney License Number is:
***If you are a non-Minnesota attorney, attach a copy of your attorney licensure.**
- ☐ I am presenting a valid, certified copy of a U.S. court order (not a subpoena) that orders release of the death certificate to me.
- ☐ Local/state/tribal/federal governmental agency (**Employee ID required**) (Best practice: wait for family to verify death record).
- ☐ I have a signed statement from a person listed above; it specifies the decedent's full name (first, middle, last) and date of death, the signer's relationship to the subject of the record, and authorizes me to obtain the certificate.
- ☐ I represent the Department of Veterans Affairs.

Sign this form in front of a Notary Public if you are applying by MAIL or FAX.

I certify that the information provided on this application is accurate and complete to the best of my knowledge. **It is against the law to provide false information to get a death certificate.** You may be subject to fines, jail time or both. Minnesota Statutes, section 144.227 and section 609.02, subdivisions 3 and 4.

Signature of requester named above		Date	
Notary Public	Signed or attested before me on _____ day of _____, 20____		Notary stamp/seal
	Printed name of notary public		
	Notary public signature	My commission expires	



Death Certificate Application

Name of person completing this application			
How many certified death certificates do you want?		Fee	Death certificates
One certified death certificate		\$13	\$13
Additional copies are \$6 each <i>if you buy them at the same time.</i>	# of additional copies	x \$6	
How many VA death certificates do you want?		Fee	VA certificates
VA death certificates are for Veterans Affairs related purposes only		\$0	\$0
How do you want us to process your request?		Fee	Choose processing
Standard – your request processed in the order received		\$0	Enter \$0 or \$20
Rush Processing—request goes ahead of standard requests (Does not include Express Shipping)		\$20	
How do you want us to send your order?		Fee	Choose delivery
Regular First-Class Mail®		\$0	Enter \$0 or \$24.90
Express Shipping (Sent USPS Priority Mail Express®)		\$24.90	
<p><i>Rush delivery requests are processed in the order received unless you choose rush processing above.</i></p> <p>Check the box if you wish to require a signature for receipt. If you do not check this box, no signature will be required at the time of delivery.</p> <ul style="list-style-type: none"> • There will be a 2.49% convenience fee for credit card transactions. • For international requests, please go to https://postcalc.usps.com to calculate and include international mailing fees. 			
Fees are due with the application and are non-refundable. Minnesota Statutes, section 144.226.			Total Amount Due
The amount you pay must cover the certificates and services you requested.			
How do you want to pay?			
Credit card MasterCard/VISA Discover/American Express	Cardholder name	Valid thru MM/YY	
	Card number	3-digit security code	
Make check or money order payable to: Olmsted County Vital Records and send by mail with application. DO NOT SEND CASH. Checks returned for non-payment will result in a \$30 charge to you. You could also face civil penalties. <i>Minnesota Statutes, section 604.113, subdivision 2.</i>			
Check	Check Number		
Money Order	Money Order Number		
Send your application, check, money order, or credit card information to:			
By mail (Do not send cash) Olmsted County Vital Records 151 4 th Street SE Rochester, MN 55904-3709		The Office of Vital Records returns applications that are incomplete, not signed in front of a notary public, and not paid in full at the time of application.	
By FAX (Payment with credit card information only) 507-328-7965			
If you have questions about this form, contact: vitals@olmstedcounty.gov or call 507-328-7660.			