

# Death Certificate Application and Instructions

The headings below match the sections on the Death Certificate Application found on pages 3 and 4.

## Information about the deceased person - used to locate the requested death record

You must complete the **required** items in this section. If you know the other information, fill it in. Vital record offices use this information to locate the correct Minnesota death record.

## What kind of death certificate do you want?

Select from the document types listed. If you do not select a specific death document, you will receive a death certificate that identifies the deceased person, the date and place of death, and the cause and manner of death.

## Requester - person completing this application

To obtain a Minnesota death certificate, Minnesota law requires you (the requester) to provide information about yourself. Complete this section whether you apply by mail or in person.

When you apply by mail, the Office of Vital Records (OVR) and county vital records offices will send the document(s) you requested to your mailing address. OVR does not have walk-in service.

You may take your application to a county vital records office and apply in person.

## MANDATORY - Check the boxes below that describe your relationship to the deceased person:

Only persons who have a right to a legal certificate (called *tangible interest*) may purchase a certified death certificate. Mark one or more of the boxes (lines 1-17) to describe your *tangible interest* in this death record. If you mark any of the boxes on lines 11-16, you must present or provide additional documentation with your application.

If you are a representative of the Department of Veterans Affairs, please wait until the family has verified the death record before requesting a VA death certificate.

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

You must sign the Death Certificate Application in front of a notary if you are requesting a certified copy of a death certificate and mailing or faxing your application.

If you are applying *in person* at a county vital records office, your signature does not need to be notarized.

## How many certified death certificates do you want?

One certified death certificate costs \$13. If you want additional copies of the death certificate, you must pay \$13 for the first copy and \$6 each for the other copies. Enter \$13 for the first certificate. Enter the *number* of additional certificates you want in the box under “# of additional copies”.

If you choose to buy additional copies of a certified death certificate later, you must still pay \$13 for the first copy and \$6 each for the other copies.

## How many VA death certificates do you want?

The surviving spouse or next of kin of a veteran, a Veterans Services Officer or a representative of the Department of Veterans Affairs may obtain a VA death certificate. Fill in the number of VA certificates you want in the “# VA certificates” box. The certificates print with a statement that limits them to VA use only.

## How do you want your request processed?

The Office of Vital Records (OVR) offers **standard processing** and **faster processing**. Standard processing means that OVR processes death certificate applications in the order received. Faster processing means that OVR moves your request ahead of standard requests. Go to [How long does it take to get a death certificate?](http://www.health.state.mn.us/divs/chs/osr/death.html#dctime) (<http://www.health.state.mn.us/divs/chs/osr/death.html#dctime>) to see OVR death certificate processing times.

If you want standard processing, enter \$0 on the application under ‘Choose processing’.

If you want **faster processing** of the death certificate, enter \$20 on the application under ‘Choose processing’.  
*Faster processing **does not** include UPS delivery.*

You can get the certificate you want the same day if you take your application to a county vital records office. If you mail or fax your application to a county vital records office, check with that office for their processing times and costs.

## How do you want the certificates you ordered delivered to you?

OVR will send the death certificates you ordered by regular mail unless you choose UPS delivery.

If you want OVR to send the certificates by UPS, enter \$16 on the application under ‘Choose delivery’. Check the box to require a signature for UPS delivery. **The Office of Vital Records and UPS are not responsible for deliveries that do not require a signature.** UPS delivery **does not** mean faster processing.

If you want OVR to send the certificates by UPS to an **address outside of the United States**, you must include a UPS prepaid envelope when you submit your application and fees to OVR.

If you take your application to a county vital records office, you can get the certificate you want the same day. If you mail or fax your application to a county vital records office, check with that office for their delivery options and costs.

## How do you want to pay?

Fees for vital records are the same at all vital records offices statewide. You must pay for documents and services when you submit your application. Vital records offices will not process applications without payment.

The Office of Vital Records accepts payment by credit card (VISA, MasterCard, and Discover), check, or money order. Make checks or money orders payable to the Minnesota Department of Health.

County vital records offices may have different payment, processing and delivery options. Check with the county office to confirm payment and delivery options if you mail your application.

## Send your application, check, money order, or credit card information

Send your application and payment to the Office of Vital Records, **OR**, take or mail your application to a county vital records office. If you send your application and payment to a county vital records office, call the office first to confirm processing, payment and delivery options.

*To obtain this information in a different format, call 651-201-5970. Printed on recycled paper.*

To obtain any Minnesota death certificate, Minnesota law requires you to provide the information on this form, 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 locate the requested death record**

|                        |                                       |                                   |                           |                            |                    |
|------------------------|---------------------------------------|-----------------------------------|---------------------------|----------------------------|--------------------|
| <b>Deceased Person</b> | First name (required)                 | Middle name (required)            | Last name (required)      | Name suffix                |                    |
|                        | Date of death [MM/DD/YYYY] (required) | Date of birth [MM/DD/YYYY] OR Age | City of death             | County of death (required) | State<br><b>MN</b> |
|                        | 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**

|                  |  |  |            |                            |       |     |
|------------------|--|--|------------|----------------------------|-------|-----|
| <b>Requester</b> | Requester name (please print)  |  |            | Date of birth (MM/DD/YYYY) |       |     |
|                  | Mailing address - UPS will not deliver to PO boxes or APO addresses. |  | Apt/Unit # | City                       | State | ZIP |
|                  | Daytime phone  |  | Email      |                            |       |     |

**MANDATORY — Check the boxes below that describe your relationship to the deceased person:**

1.  A child of the subject
2.  The parent of the subject
3.  The sibling of the subject
4.  The spouse on the record
5.  The grandparent of the subject
6.  The grandchild of the subject
7.  Party responsible (licensed mortician or funeral director) for filing the death record
8.  Subject's personal representative; the certified death certificate is required for the administration of the estate
9.  Successor of the subject; the certified death certificate is required for the administration of the estate
10.  Trustee of a trust; the certified death certificate is required for the proper administration of the trust
11.  Determination or protection of a personal or property right (*You must submit documentation showing this relationship*)
12.  Adoption agency — to complete post-adoption search (*Employee ID required*)
13.  Attorney — my Minnesota Attorney License Number is: \_\_\_\_\_ NON-Minnesota Attorney - affix copy of license
14.  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
15.  Local/state/tribal/federal governmental agency (*Employee ID required*)
16.  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.
17.  I am a representative of the Department of Veterans Affairs (Best practice: wait until family has verified death record.)

**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                    |
|                                    | (if applying in person) |

|                      |   |                       |                   |
|----------------------|---|-----------------------|-------------------|
| <b>Notary Public</b> | Signed or attested before me on _____ day of _____, 20_____ |                       | Notary stamp/seal |
|                      | Printed name of notary public                               |                       |                   |
|                      | Notary public signature                                     | My commission expires |                   |

|   |                 |  |                       |                                       |
|---|-----------------|--|-----------------------|---------------------------------------|
| Name of person completing this application  |                 |  |                       |                                       |
| <b>How many certified death certificates do you want?</b>   |                 |  | <b>Fee</b>            | <b>Subtotals</b>                      |
| One certified death certificate   |                 |  | \$13                  |                                       |
| Additional copies are \$6 each <i>if you buy them at the same time as one purchased at \$13.</i>  |                 | # of additional copies   | x \$6                 |                                       |
| <b>How many VA death certificates do you want?</b>  |                 |  | <b>Fee</b>            | <b>VA certificates</b>                |
| VA death certificates are for Veterans Affairs related purposes only  |                 | # VA certificates  | \$0                   | \$0                                   |
| <b>How do you want your request processed?</b>  |                 |  | <b>Fee</b>            | <b>Choose processing</b>              |
| Standard – request processed in the order received  |                 |  | \$0                   |                                       |
| Faster – your request goes ahead of standard requests ( <i>Does not include UPS delivery</i> )  |                 |  | \$20                  | Enter \$0 or \$20                     |
| <b>How do you want the certificates you ordered delivered to you?</b>   |                 |  | <b>Fee</b>            | <b>Choose delivery</b>                |
| Regular First Class Mail®   |                 |  | \$0                   |                                       |
| United Parcel Service (UPS)   |                 |  | \$16                  | Enter \$0 or \$16                     |
| <p><b>For UPS delivery</b>, check here <input type="checkbox"/> to require a signature.<br/> <b>The Office of Vital Records and UPS are not responsible for deliveries that do not require a signature.</b><br/>         UPS will not deliver to PO boxes or APO addresses.<br/>         If you want <b>UPS delivery to an address outside of the United States</b>, you must include a UPS prepaid envelope when you submit your application and fees.</p> |                 |  |                       |                                       |
| <p align="center"><b>The amount you pay must cover the certificates and services you requested.</b></p>   |                 |  |                       | <b>Amount due</b>                     |
|   |                 |  |                       | Write in total if filling out by hand |
|   |                 |  |                       | Amount due                            |
| <b>How do you want to pay? Fees are due with the application and are non-refundable. Minnesota Statutes, section 144.226.</b>   |                 |  |                       |                                       |
| <input type="checkbox"/> <b>Credit card</b><br>MasterCard/VISA/Discover   | Cardholder name |  | Valid thru MM/YY      |                                       |
|   | Card number     |  | 3-digit security code |                                       |
| <input type="checkbox"/> <b>Check</b><br>Check # _____  |                 | <p><b>Make check or money order payable to the Minnesota Department of Health and send by mail with application. DO NOT SEND CASH.</b></p> <p>Checks returned for non-payment will result in a \$30 charge to you.<br/>         You could also face civil penalties.<br/> <i>Minnesota Statutes, section 604.113, subdivision 2.</i></p> |                       |                                       |
| <input type="checkbox"/> <b>Money order</b><br>Money order # _____  |                 |  |                       |                                       |
| <b>Send your application, check, money order, or credit card information</b>  |                 |  |                       |                                       |
| <b>By mail</b> (Do not send cash)<br><br>Minnesota Department of Health<br>Central Cashiering – Vital Records<br>PO Box 64499<br>St. Paul MN 55164-0499<br><br><b>By FAX</b><br><br>Application with credit card information only<br>651-201-5740   |                 | 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.  |                       |                                       |
| If you have <b>questions about this form</b> , contact <a href="mailto:health.vitalrecords@state.mn.us">health.vitalrecords@state.mn.us</a> or 651-201-5970.  |                 |  |                       |                                       |