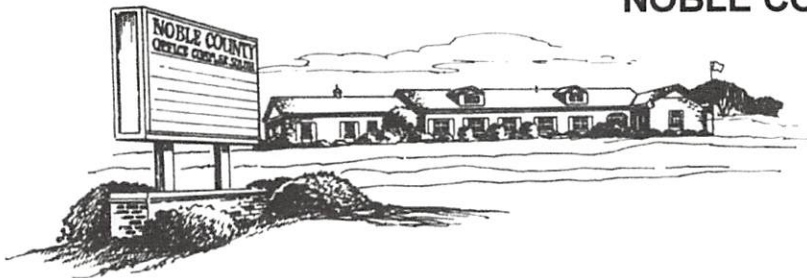


# NOBLE COUNTY HEALTH DEPARTMENT



2090 N. State Road 9, Suite C  
Albion, Indiana 46701

Telephone: (260) 636-2191  
Fax: (260) 636-2192  
Clinic Fax: (260) 636-3753

## APPLICATION FOR DEATH RECORD

Please indicate which type of record or document you would prefer:

Certified Death Certificate- \$12 fee

Genealogy Document \$10 fee  
Non-certified. All searches are non-refundable

Terms of Payment: Money order, Credit Card or Cash, Checks are not accepted.

**IDENTIFICATION REQUIRED**  
**Photo Copy – Driver's License or State I.D.**

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

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

DATE OF DEATH \_\_\_\_\_ NUMBER OF COPIES \_\_\_\_\_

PLACE OF DEATH (CITY/STATE) \_\_\_\_\_

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

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

Printed Name of Requestor \_\_\_\_\_ Signature of Requestor \_\_\_\_\_ Date \_\_\_\_\_

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

*IC 16-37-1-8 Indiana Vital Statistics laws clearly require that a health officer may only issue a certified copy if he/she is satisfied that the applicant has a direct interest in the record.*

### For Office Use Only

Receipt Number \_\_\_\_\_ Volume Number \_\_\_\_\_

Verifier \_\_\_\_\_ Date Returned \_\_\_\_\_