



MORRISON COUNTY

Morrison County will provide cost effective, high quality services
to county residents in a friendly and respectful manner.

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 (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 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 - UPS® will not deliver to PO boxes or APO addresses | | Apt/Unit # | City | State | ZIP Code™ |
| | Daytime phone (10-digit) | | Email | | | |

MANDATORY — Mark the boxes 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. Subject's personal representative: the certified death certificate is required for the administration of the estate
8. Successor of the subject; the certified death certificate is required for the administration of the estate
9. Trustee of a trust; the certified death certificate is required for the proper administration of the trust
10. Determination or protection of a personal or property right (*You must submit documentation showing this relationship*)
11. Adoption agency — to complete post-adoption search (*Employee ID required*)
12. Attorney – I represent the subject, or a person listed in items 1-10 above. **If you are a NON-Minnesota attorney, attach a copy of your attorney license**
My Minnesota Attorney License Number is: _____
13. 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
14. Local/state/tribal/federal governmental agency (*Employee ID required*) (Best practice: wait for family to verify death record).
15. 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.
16. 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: (if applying in person) |
| Notary Public | Signed or attested before me on _____ day of _____, 20_____ | |
| | Printed name of notary public | |
| | Notary public signature | My commission expires |

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| | | |
|---|--|--|
| How many certified death certificates do you want? | | |
| One certified death certificate | | \$13 |
| Additional copies (if purchased at this time) | | # of copies () x \$6 each |
| For VA death certificates contact: | | |
| Veterans Affairs at 320-632-0290 | | |
| How we process your request: | | |
| Standard – your request processed in the order received | | |
| How do you want us to send your order? | | |
| Regular First-Class Mail® | | \$0 |
| United Parcel Service (UPS®) <i>go to VitalChek.com for processing</i> | | |
| Fees are due with the application and are non-refundable. Minnesota Statutes, section 144.226. | | |
| Total due | | |
| Total due = costs of death certificate(s) | | |
| How do you want to pay? | | |
| <input type="checkbox"/> Credit card MasterCard / VISA/ Discover <small>PLEASE NOTE: An additional \$7.00 fee is charged for paying with a credit card.</small> | | Cardholder name as shown on card Card number |
| <input type="checkbox"/> Check Check # _____ <input type="checkbox"/> Money order Money order # _____ | | Make check or money order payable to: Morrison County Recorder mail it with your application. <small>PLEASE DO NOT SEND CASH.</small> <small>Checks returned for non-payment will result in a \$30 charge to you. You could also face civil penalties. Minnesota Statutes, section 604.113, subdivision 2.</small> |
| Send your application and payment | | |
| By mail Morrison County Recorder 213 SE 1st Ave Little Falls, Mn 56345 | | The Morrison County Recorder office cannot process applications that are: <ul style="list-style-type: none"> ▪ Incomplete ▪ Not signed in front of a notary public ▪ Not paid in full at time of application |
| If you have questions about this form, contact 320-632-0146 | | |