#### Office of Vital Records - First Floor



Physical: 22 South State Street Clearfield, Utah 84015 Mailing: P.O. Box 618, Farmington, UT 84025 Office Hours: Monday – Friday 8 a.m. to 5 p.m.\* (801) 525-5150 | daviscountyutah.gov/health

\*Applications taken after 4:30 p.m. will be processed the next business day.

## First certified copy \$30.00\*

### Each additional certified copy (ordered at the same time) \$10.00\*

\*Fees subject to change. Please review the certificate for accuracy; copies will only be replaced within 90 days of the issue date.

Death certificate reprint fee of \$3 each will be charged for any death certificate that is reissued within 90 days of original issuance.

If the requestor does not respond to a written notice from Vital Records within 90 days, DCHD may retain all monies paid.

#### **Death Certificate Request Form**

Certificates available: Utah deaths from 8/2006-preser	nt. Additiona	l fees may apply for	all other Utah de	eaths.	
Full Name of Deceased: First Mic	ldle		ast		
Date of Death: City of Death: _			Last County of Death:		
Date of Birth: State or Country	ry of Birth	<b>:</b>			
Parent 1:	Parent 2:				
(Full Maiden Name)	Parent 2:			iden Name)	
Full Maiden Name of Spouse, if married:					
Note: Positive identification is required (see reverse). If submitting by made be ordered by the named individual's surviving spouse, parent, sibling, ching Records may be requested by the general pure it is a criminal violation to make false statements on vio	ld, grandpare blic 50 years rital records	nt, or grandchild. Othe or more after the date forms or to frauduler	erwise, proof of lega of death. ntly obtain a recor	al need is required.	
ame: Telephone number:					
Address:					
Address: Street Address	City		State	ZIP	
Relationship to individual on certificate: Self Parent	Sibling	Spouse Child	Grandparent	Grandchild	
Reason for requesting certificate:					
Signature:	Date:				
Number of Certified Copies Requested			s to be mailed, te mailing addr	please print the ress below:	
1 Non-Refundable Search-Includes 1 Certified copy:	\$ 30.00				
Additional certified copies x \$10.00 each:	\$				
Replacement Certificate Fee x \$3.00 each:	\$				
Expedite Fee:	\$		Check payments are payable to Davis  County Health Department.		
Affidavit Fee:	\$	–	n Department.		
Total Fee:	\$	Credit/debit cards will be assessed a 2.45% processing fee, minimum of \$1.50.			
For Office	Use Only				
Payment Method: Cash Check/M.O. Credit/Debit*	Date		_ Clerk Initial	ls	
		st #			
Date Mailed (if applicable)		#			

### **Acceptable Identification List**

Government-issued identification is required for the purchase of a Utah birth or death certificate. Mailed requests must include an enlarged, easily identifiable photocopy of the <u>back and front</u> of your I.D. If no identification is enclosed, your application will be returned. All I.D. must be current.

## Primary (1 of the following)

- Government-issued Photo Driver License
- Government-issued Photo ID Card
- Government-issued Work ID
- Employment Card
- U.S. Military ID Card
- Tribal ID Card
- Pilot License
- Alien Registration Card
- Permanent Resident Card
- Passport
- Temporary Resident Card
- Certificate of U.S. Citizenship
- U.S. Certification of Naturalization
- U.S Citizen Identification Card
- Matricula Consular Card
- Concealed Weapon Permit
- Mexican Voter Registration Card
- Jail/Prison Release Form (with photo)

#### OR

# Secondary (2 of the following)

- School, College, or University ID (with date)
- Voter Registration Card
- Social Security Card
- U.S. Military Separation/DD-214
- Motor Vehicle Registration/Title
- Marriage License (not issued by Vital Records)
- Court Ordered Document
- Jail/Prison Documents
- Probation Documents
- Property Tax Receipt
- Veterans Universal Access ID Card
- Selective Service Card
- Hunting/Fishing License
- Insurance Card or Document
- Utility Bill
- Business License
- Professional License
- Work ID/W-2/Paycheck

We Cannot Accept
Driving Privilege Card
Novelty ID Card

If you cannot provide acceptable identification, ask a spouse, parent, grandparent, sibling, or adult child who can provide appropriate identification to request the vital record. Proof of relationship may also be required, such as a birth, death, or marriage certificate.

