

Death Certificate Application

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							
Subject/Deceased	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)
	First parent's name		Second parent's name		Spouse on record (if any)		
State MN							

What kind of death certificate do you want?	
<input type="checkbox"/>	Certified death certificate <i>with</i> cause of death information
<input type="checkbox"/>	Certified death certificate <i>without</i> cause of death information (only for records 1997 to today)
<input type="checkbox"/>	Certified VA death certificate for Veterans Affairs-related purposes

Person completing this application (requester)						
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
	Daytime phone			Email		
ZIP						

MANDATORY — Check the boxes below that describe your relationship to the deceased subject of the record:	
1. <input type="checkbox"/>	A child of the subject
2. <input type="checkbox"/>	The parent of the subject
3. <input type="checkbox"/>	The sibling of the subject
4. <input type="checkbox"/>	The spouse on the record
5. <input type="checkbox"/>	The grandparent of the subject
6. <input type="checkbox"/>	The grandchild of the subject
7. <input type="checkbox"/>	Party responsible (licensed mortician or funeral director) for filing the death record
8. <input type="checkbox"/>	Subject's personal representative; the certified death certificate is required for the administration of the estate
9. <input type="checkbox"/>	Successor of the subject; the certified death certificate is required for the administration of the estate
10. <input type="checkbox"/>	Trustee of a trust; the certified death certificate is required for the proper administration of the trust
11. <input type="checkbox"/>	Determination or protection of a personal or property right (<i>You must submit documentation showing this relationship</i>)
12. <input type="checkbox"/>	Adoption agency — to complete post-adoption search (<i>Employee ID required</i>)
13. <input type="checkbox"/>	Attorney — my Minnesota Attorney License Number is: _____ NON-Minnesota Attorney - affix copy of license
14. <input type="checkbox"/>	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. <input type="checkbox"/>	Local/state/tribal/federal governmental agency (<i>Employee ID required</i>)
16. <input type="checkbox"/>	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. <input type="checkbox"/>	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 completing this application		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
Notary stamp/seal		

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Name of person completing this application				
How many certified death certificates do you want?			Fee	Subtotals
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	
How many VA death certificates do you want?		# VA certificates	Fee	VA certificates
VA death certificates are for Veterans Affairs related purposes only			\$0	\$0
How do you want to pay?			Amount due Write in total if filling out by hand	
Fees are due with the application and are non-refundable. Minnesota Statutes, section 144.226.			Amount due	
<input type="checkbox"/> Credit card MasterCard/VISA/Discover	Cardholder name		Valid thru MM/YY	
	Card number		3-digit security code	
<input type="checkbox"/> Check Check # _____ <input type="checkbox"/> Money order Money order # _____		Make check or money order payable to Renville County Recorder and send by mail with your application to address below. 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>		
If you have questions about this form , contact Recorder@Renvillecountymn.com or 320-523-3669				
Mail your application, check, money order, or credit card information to:				
<p>FAX application with credit card information:</p>				