



# JOHNSON COUNTY HEALTH DEPARTMENT

Courthouse Annex  
86 West Court Street  
Franklin, IN 46131

(317) 346-4365  
Fax (317) 736-5264

## Death Certificate Application

Person's listed below can obtain a certified death certificate:

- ❖ Immediate family member (parent, child or spouse) 18 years of age or older
- ❖ X-Spouse if a copy of divorce decree is provided by applicant
- ❖ Informant of certificate
- ❖ Court order
- ❖ Insurance companies with ID
- ❖ Attorney offices with proof of representation from deceased or deceased family.

### APPLICATION FOR DEATH CERTIFICATE

**Photo ID is required to obtain a death certificate. Those representing an *insurance company, court or an attorney* will need verification of representation.**

PLEASE PRINT ALL INFORMATION  
FEE \$12.00/copy

Current Date: \_\_\_\_\_

Name of Deceased: \_\_\_\_\_ Date of Death \_\_\_\_\_

Place of Death: \_\_\_\_\_

Purpose for which record is requested: \_\_\_\_\_

Relationship to deceased: Spouse: Parent Child Representative Other \_\_\_\_\_

Print Your Name \_\_\_\_\_ Signature \_\_\_\_\_

Address of Applicant \_\_\_\_\_

Master Card, Visa or Money orders only please

ACC# \_\_\_\_\_ Expire Date \_\_\_\_\_ Security Code \_\_\_\_\_

#### **OFFICE USE ONLY:**

Receipt # \_\_\_\_\_ Check or Money Order # \_\_\_\_\_