DEATH CERTIFICATE APPLICATION MONROE COUNTY, ROCHESTER, NY - DISTRICT 2700

| DECEASED NAME: | |
|-----------------------------|--|
| DATE OF DEATH: | |
| NUMBER OF COPIES: | |
| Certified copies are \$30 e | each. (ex. 2 copies = \$60) Please send check or money order only. DO NOT MAIL CASH |
| PLEASE CHOOSE: | WITH CAUSE OF DEATH WITHOUT CAUSE OF DEATH |
| | APPLICANT INFORMATION |
| APPLICANT'S NAME: | |
| RELATIONSHIP: | CHILDPARENTSIBLINGSPOUSEATTORNEY (request on Letterhead or Atty ID)EXECUTOR (include copy of Letters Testamentary) |
| STREET ADDRESS: ** | |
| CITY, STATE, ZIP: | |
| PHONE NUMBER: | |
| SHIPPING: | USPS First Class Mail - No Charge |
| | FedEx Two Day Delivery – additional \$40.00 – signature required |

**Delivery to a PO Box must include a notarized permission statement allowing us to mail there.

In order to process your request, you must submit the completed application along with a legible copy of your photo ID** and a check or money order for \$30 (per copy requested) plus any additional shipping charges if applicable to:

Monroe County Vital Records Office 740 East Henrietta Road Rochester, NY 14623 Attn: Death Record Request

**If payee is someone other than the applicant, they must also include a copy of their photo ID.

Incomplete applications will delay your order. If you have any questions about your order, please contact our office at (585) 753-5141.