

Vital Records – Mail Service (Funeral D. C. Order)

Marion County Public Health Department

3838 North Rural Street

Indianapolis, Indiana 46205-2930

Telephone: 317-221-2390, 221-2400

Spanish: 221-2393 Fax: 221-2411



FUNERAL DIRECTOR APPLICATION FOR A CERTIFIED DEATH CERTIFICATE BY MAIL

*This form is **not needed** for in-person purchase at the walk-in office.*

Dear Funeral Director:

The person you are requesting a Certified Death Certificate for must have died in Marion County for our office to provide this mail service for your funeral home.

To obtain a Certified Death Certificate, you must show you have a direct interest in the record and need the record to determine personal or property rights (IC 16-37-1-8). Please answer each question below.

1. **Full name of deceased:** FIRST _____ MIDDLE _____ LAST _____

2. **Date-of-Death:** MONTH _____ DAY _____ YEAR _____

3. Location of death: CITY/TOWN _____ COUNTY Marion* STATE Indiana* *Must have been in Marion County, IN

4. What is your relationship to the person in line # 1? Funeral Director (Family Representative)

5. For what purpose is this record to be used? Funeral, Family Records

6. **Mail to:** PRINT YOUR FUNERAL HOME _____ YOUR SIGNATURE _____

7. **Mail to:** ADDRESS _____ CITY _____ STATE _____ ZIP _____

8. Your telephone numbers: DAY _____ CELL _____

Type of Death Certificate	Quantity	Price	Total Amount
Certified		\$20.00 each	\$
Certified in Plastic Sleeve		\$22.00 each	\$
Non-Certified 1952- Present		\$ 0.25 each	\$
Non-Certified prior to 1952		\$10.00 each	\$
Veteran (if applicable)		1 free	\$ 0.00
Grand Total			\$

Please **send to the address at the top of this page and include** the following with your completed application:

- ✓ A check or money order *payable to Marion County Public Health Department (no cash)*

Sincerely,

