



MORRISON COUNTY

Morrison County will provide cost effective, high quality services to county residents in a friendly and respectful manner.

Death Certificate Application

To obtain any Minnesota death certificate, you must fill out the information on this form.

You must also 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 find the requested death record

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

What kind of death certificate do you want?

- Certified death certificate *with* cause of death information
- Certified death certificate *without* cause of death information (only for records 1997 to today)
- Certified VA death certificate for Veterans Affairs-related purposes

Requester - person completing this application – by law you must supply this information

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	ZIP Code™
	Daytime phone (10-digit)			Email				

MANDATORY — Mark the boxes that describe your relationship to the deceased person:

1. A child of the subject
2. The parent of the subject
3. The sibling of the subject
4. The spouse on the record
5. The grandparent of the subject
6. The grandchild of the subject
7. Subject's personal representative: the certified death certificate is required for the administration of the estate
8. Successor of the subject; the certified death certificate is required for the administration of the estate
9. Trustee of a trust; the certified death certificate is required for the proper administration of the trust
10. Determination or protection of a personal or property right (*You must submit documentation showing this relationship*)
11. Adoption agency — to complete post-adoption search (*Employee ID required*)
12. Attorney – I represent the subject, or a person listed in items 1-10 above. **If you are a NON-Minnesota attorney, attach a copy of your attorney license**
My Minnesota Attorney License Number is:
13. 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
14. Local/state/tribal/federal governmental agency (*Employee ID required*) (Best practice: wait for family to verify death record).
15. 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.
16. I represent the Department of Veterans Affairs.

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 named above		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



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How many certified death certificates do you want?		Fee	Death certificates
One certified death certificate		\$13	
Additional copies (if purchased at this time)	# of copies ()	x \$6 each	
For VA death certificates contact:			
Veterans Affairs at 320- 632- 0290			
How we process your request:			
Standard – your request processed in the order received			
How do you want us to send your order?		Fee	
Regular First-Class Mail®		\$0	
United Parcel Service (UPS®) <i>go to VitalChek.com for processing</i>			
Fees are due with the application and are non-refundable. Minnesota Statutes, section 144.226.			Total due
Total due = costs of death certificate(s)			
How do you want to pay?			
<input type="checkbox"/> Credit card MasterCard / VISA/ Discover PLEASE NOTE: An additional \$7 .00 fee is charged for paying with a credit card.	Cardholder name as shown on card	Valid thru MM/YY	
	Card number	3-digit security code	
<input type="checkbox"/> Check Check # _____		Make check or money order payable to: Morrison County Recorder mail it with your application. PLEASE DO NOT SEND CASH. 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>	
<input type="checkbox"/> Money order Money order # _____			
Send your application and payment			
By mail Morrison County Recorder 213 SE 1st Ave Little Falls, Mn 56345		The Morrison County Recorder office cannot process applications that are: <ul style="list-style-type: none"> ▪ Incomplete ▪ Not signed in front of a notary public ▪ Not paid in full at time of application 	
If you have questions about this form, contact 320-632-0146			