

**Vital Records Office – First Floor**477 23<sup>rd</sup> Street, Ogden, UT – 84401

Office Hours: Monday – Friday 8 a.m. to 5 p.m.

(801) 399-7130 – [www.webermorganhealth.gov](http://www.webermorganhealth.gov)*\*Applications taken after 4 p.m. will be processed the next business day.***First certified copy \$30.00\*****Each additional certified copy (ordered at the same time) \$10.00\*****\*Fees subject to change. Please review the certificate for accuracy;** certificates will only be replaced within 90 days of the issue date.

Death certificate reprint fee of \$3 each will be charged for any death certificate that is reissued within 90 days of original issuance.

If the requestor does not respond to a written notice from Vital Records within 90 days, WMHD may retain all monies paid.

**Death Certificate Request Form***We have records for all of Utah from for the previous 50 years. Additional processing time may apply for years prior to 2007.**Records over 50 years may be available at the Utah State Archives.***Full Name of Deceased:** \_\_\_\_\_

First

Middle

Last

**Date of Death:** \_\_\_\_\_ **City of Death:** \_\_\_\_\_ **County of Death:** \_\_\_\_\_

(if unknown, approximate year)

**Date of Birth:** \_\_\_\_\_ **State or Country of Birth:** \_\_\_\_\_**Parent 1:** \_\_\_\_\_ **Parent 2:** \_\_\_\_\_

(Full Birth Name)

(Full Birth Name)

**Full Maiden Name of Spouse, if married:** \_\_\_\_\_**Note: Positive identification is required (see reverse).** If submitting by mail, please include a copy of both sides of your identification. Certificates may be ordered by the named individual's surviving spouse, parent, child, sibling, grandparent, or grandchild. Otherwise, proof of legal need is required.

Records may be requested by the general public 50 years or more after the date of death.

**It is a criminal violation to make false statements on vital records forms or to fraudulently obtain a record.****Individual Making Request – Valid ID and Proof of Relationship Required**

See back of application for list of acceptable identification and proof of relationship requirements.

**Name:** \_\_\_\_\_ **Telephone number:** \_\_\_\_\_**Address:** \_\_\_\_\_

Street Address

City

State

ZIP

**Relationship to individual on certificate:** Spouse Parent Child Sibling Grandparent Grandchild**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_**Number of Certified Copies Requested**

If this order is to be mailed, please print the complete mailing address below:

1 Non-Refundable Search-Includes 1 Certified copy: \$ 30.00     Additional certified copies x \$10.00 each: \$ \_\_\_\_\_     Replacement Certificate Fee x \$3.00 each: \$ \_\_\_\_\_**Total:** \$ \_\_\_\_\_**No cash or credit/debit cards by mail.****Make check or money order payable to WMHD.****For Office Use Only****ID** \_\_\_\_\_ **Exp** \_\_\_\_\_ ☐ ID Attached **Date** \_\_\_\_\_**Payment Method:** Cash Check/M.O. Credit/Debit\* **Request #** \_\_\_\_\_ **Clerk Initials** \_\_\_\_\_

Change Given \$ \_\_\_\_\_ Check or CC # \_\_\_\_\_ Date Completed (if applicable) \_\_\_\_\_ Int \_\_\_\_\_

Date Mailed (if applicable) \_\_\_\_\_ Qty \_\_\_\_\_

# Acceptable Identification List to Obtain Vital Records

## ID Must Be Current

Identification is required for all non-public Vital Records. Mailed requests must include an easily identifiable photocopy of the front and back of the identification from the list below.

One form of identification from the “Primary” list is required or two forms of identification from the “Secondary” list.

### Primary (Need 1)

OR

### Secondary (Need 2)

- Government Issued Photo Driver License
- Government Issued Photo identification
- Employment Authorization Card
- U.S. Military Identification Card
- Tribal Identification Card
- Permanent Resident Card
- Foreign Visa
- U.S. Passport
- U.S. Passport Card
- Foreign Passport
- U.S. Naturalization Certificate
- U.S. Certificate of Citizenship
- Matricula Consular Card
- Concealed Weapon Permit
- Mexican Voter Registration Card
- Jail/Prison Release Form (with photo)
- Veteran’s Health ID Card
- Work Identification, Paycheck Stub, or W-2
- School, University, or College Identification Card
- Voter Registration Card
- Social Security Card
- U.S. Military Separation/DD-214
- Motor Vehicle Registration or Title
- Marriage License (certified copy with signatures)
- Court Order or Court Document
- Jail or Prison Document
- Probation Document
- Property Tax Receipt
- Selective Service Card
- Hunting or Fishing License
- Insurance Card or Document
- Utility Bill
- Business License
- Professional License

**We Cannot Accept:** Driving Privilege Card or Novelty Identification Card as prohibited by UCA 53-3-207(7)(b)(ii).

If you cannot provide acceptable identification then another person who is entitled to the record may make the request for you and provide their acceptable identification. This includes: Listed Spouse, Parent, Child, Sibling, Grandparent, Grandchild. (this does not include ex-spouse, stepfamily, or in-laws)

## Proof of Relationship

I am requesting a Death Certificate for “Person A”

