

Death Certificate Request

Use this form to request a Minnesota death certificate. If we can't locate the record with the information you provide, we'll send you a Statement of No Record Found. NOTE: County offices generally provide the fastest vital records service. Certified records of deaths from 1997 to the present are available from any Minnesota county. Records prior to 1997 are only available from the county of death or the Office of Vital Records (Minnesota Department of Health).

| Info | rmation | about the deceas | sed person | used to | find the | death reco | rd | | | | | | | |
|---|---|-------------------------------|--------------|---------------------------|-----------------------------|------------------|------------------|------|----------------------------|-------------|-------------|--|--|--|
| ı, | First name (required) | | | Middl | e name (re | equired) | Last name (requi | | ed) | Name suffix | | | | |
| Decedent | Date of death [MM/DD/YYYY] (required) | | Date of birt | :h [MM/DD/Y | Or Age City of de | | ith (| | County of death (required) | | State MN | | | |
| ٥ | First parent's name | | | Secon | Second parent's name Spouse | | | | e on record (if any) | | | | | |
| What kind of death certificate do you want? | | | | | | | | | | | | | | |
| ☐ Certified death certificate <i>with</i> 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 | | | | | | | | | | | | | | |
| REQ | UIRED - | Requester inform | nation | | | | | | | | | | | |
| Req | uester na | ime (please print) |) | | | | | Date | e of birth (| MM/DD/YYYY) |) | | | |
| Street address | | | | | | Daytime phone (1 | | | 10-digit) | | | | | |
| Apt/ | 'Unit # | City | | State | Zip code | | Email | | | | | | | |
| REQUIRED – 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. | \square 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. 12. | □ Adoption agency — to complete post-adoption search (Employee ID required) □ Attorney – I am the subject's attorney or the attorney for a person listed in items If you are a NON-Minnesota attorney, | | | | | | | | | | | | | |
| 12. | | | | - | - | a person list | leu III Itellis | | | | | | | |
| 13. | 1-10 above. My Minnesota Attorney License Number is: attach a copy of your attorney license 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. | | | | | | | | | | | | | | |
| 15. | | | | | | | | | | | | | | |
| 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 (Best practice: wait until family has verified death record). | | | | | | | | | | | | | | |
| REQUIRED – Sign this form in front of a notary public if ordering by mail or fax | | | | | | | | | | | | | | |
| I certify that the information provided on this application is accurate and complete to the best of my knowledge. Signature of requester named above Date (if applying in person) | | | | | | | | | | | | | | |
| Signa | ature of re | equester named ab | ove | | | | | | | , , , | | | | |
| | | | | | | | | | Notary st | camp/seal | | | | |
| > | | | | | ay of , 20 | | | | | | | | | |
| Notary | Printed r | Printed name of notary public | | | | | | | | | | | | |
| ž | Notary public signature | | | | | My commis | sion expires | | | | | | | |

DEATH CERTIFICATE REQUEST

| Requester Name: | | | | | | | | |
|--|--|---|------------|------|--|--|--|--|
| Fees and records request | | Fee | | | | | | |
| First death certificate | | | \$13 | \$13 | | | | |
| Additional death certificates | # of extra | a copies | \$6 each | | | | | |
| Veterans Affairs (VA) death certificate (for VA purposes | only)** | # of copies | \$0 | | | | | |
| Processing | | | Fee | | | | | |
| Standard — request processed in the order received | | \$0 | | | | | | |
| | | | | | | | | |
| Shipping | Fee | | | | | | | |
| Regular first-class mail | | \$0 | | | | | | |
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| Total due Fees are due with | the applic | ation and are non-refun | dable. | | | | | |
| Payment method | | | _ | | | | | |
| | | | | | | | | |
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| | | | | | | | | |
| Check # | Make check or money order payable to Goodhue County Recorder. DO NOT SEND CASH. Checks | | | | | | | |
| Money order# | | returned for non-payment will result in a \$30 charge | | | | | | |
| ☐ Money order | to you. You could also face civil penalties. | | | | | | | |
| Send your application and payment to: | | | | | | | | |
| By Mail: Goodhue County Recorder | | | | | | | | |
| 509 West 5th Street | | | | | | | | |
| Red Wing, MN 55066 | | | | | | | | |
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| | | | | | | | | |
| | | | | | | | | |
| If you have questions, please contact us at 651-385-3148 | | | | | | | | |

It's illegal to give false information to amend a vital record, and it may subject you to fines, jail time, or both.

- The surviving spouse or next of kin of a veteran
- A service officer of any veterans organization chartered by the Congress of the United States
- A representative of the Department of Veterans Affairs

^{**} You may order a free VA death certificate if you are: