

FORM TO CORRECT A COLORADO DEATH CERTIFICATE

NAME OF DECEDENT AS SHOWN ON THE DEATH CERTIFICATE ►

Complete this form in full Cross outs and/or white-out is not acceptable Print or type the information in ink

	DECEDENT'S DATE OF D	DEATH ►		DECE	DENT'S PLAC	E OF DEATH (CITY AND/OR	COUNTY) ►				
		PHYSICIAN,	CORON				AS SUCH				
	INCORRECT INFORM	MATION AS IT APPEA Print or Type this i	RS ON THE	blete this section to corr	ect items #3	CORR	See revers ECT INFORM Type this info	ATION	r instructions		
MEDICAL SECTION	→ 										
MEC	Signature of Physician →				Printed Na	ame of Physician			Date		
	Signature of Coroner →				Printed Na	ame of Coroner			Date		
-	*Signature of Funeral Director					Printed Name of Funeral Director			Date		
	*My signature certifies th			e corrections I am requesti	-						
		FUNERAL		DR, REQUEST te this section to correct		R PERSON ACTING AS		na aida fa	r instructions		
	INCORRECT INFORMA	TION AS IT APPEARS Print or Type this info	ON THE D			CORREC	ct INFORMAT	ION			
▲ LEGAL SECTION											
REQUESTOR V	The information above is true to the best of my knowledge and I request the death certificate be corrected accordingly.										
	**Signature ►					Your relationship to the ☐Funeral home ☐Ir ☐Next of kin (specify) ▶	Iformant	eck box√	()		
	Print Name:					Phone:					
	Address:					City	State Zip		Zip		
	Date:	If you would li notified when co (Check b	mpleted	Phone:	Em:	ail (Print Clearly)			·		
[**ID REQUIRED ► R	ETURN YOUR REQUES	T WITH A COI	PY OF YOUR DRIVER'S LICE	NSE, STATE ID,	PASSPORT OR OTHER ACCEP	TABLE ID (SEE	WEBSITE I	FOR OTHER ID)		
►		•		n-refundable)		Quar	<u> </u>	Fees (\$)	Total (
▼SERVICES & FEES								20.00	= <u>\$</u> = <u>\$</u>		
						nges		13.00	= \$		
ICES				10.00	= \$						
V SERVI	Expedited shipping (USA Only)	_]UPS (credit card only)		19.00	= \$		
	Regular ma	ail no charge.		<u>Total Nu</u>	mber of Dea	ath Certificates:	G	arand Tot	tal: <u>\$</u>		
A COPY IN A COPY INA COPY IN A COPY					Vital Records	s), and Credit Cards. Not res	ponsible for	cash sen [.]	t through the ma		
***CRED	DIT CARDS ORDERS (Che er name	,	Visa 🔲 N der Signatu		er Convenie Credit card	nce charge will apply (see t number	ee schedule Expiratic		Total charges		
Mailing/F Dur Webs	PHYSICAL ADDRESS ►			-		er, Colorado 80246-1530 business days upon receipt	of your requ	est			

CONTACT INFORMATION ► Name: Death Unit Phone: 303-692-2208 Email: cdphe_deathcertificates@state.co.us

INSTRUCTIONS TO CORRECT A COLORADO DEATH CERTIFICATE

Item To Be Corrected	Who May Apply To Make The Correction?	Documentation Required
Death certificate entry (non-medical) Item # 1, 2, 4 – 21b	Funeral Director or person acting as such	Form to Correct a Colorado Death Certificate
Death certificate entry (non-medical) Item # 1, 2, 4 – 21b	Informant or next of kin if informant is deceased	One or more documents supporting information being corrected and a signed Form to Correct a Colorado Death Certificate
Medical item including cause of death Item # 3, 23 - 35	Physician and/or Coroner	Form to Correct a Colorado Death Certificate signed by a physician and/or coroner
Medical Item # 3, 23 - 35	Funeral Director or person acting as such (Typographical errors only)	Form to Correct a Colorado Death Certificate
Marital Status	Informant or next of kin if informant is deceased	Form to Correct a Colorado Death Certificate along with Documentary Evidence
Marital Status	Funeral Director or person acting as such	Form to Correct a Colorado Death Certificate
Marital Status/Common Law	Interested party	Certified Court Order directing Vital Statistics to change the marital status on the death certificate

All documents which support the information being corrected must have been established at least five years prior to the date of application or within seven years of the date of event. (CVSR 5 CCR 1006-1 Section 9.3)

SUGGESTED DOCUMENTS:

- Certified birth record (state or county issued)
- Certified baptismal or other church records •
- School census or transcript records
- Military Discharge Record (DD214)

- Insurance policy-application page
- **Employment records** •
- Social Security Numident or SS-5
- Certified Court Order •

Colorado Board of Health Regulation Section 9.7 Amendment of the Same Item More Than Once - Once an amendment of an item is made on a vital record, that item shall not be amended again... All subsequent changes to the same item must be done by preparing and filing a new certificate.

***EXCHANGE POLICY - Effective 7/1/2011 previously issued certified copies of the death certificate(s) may be exchanged at any time after a correction has been made to the death certificate for \$13.00 each. You must return the certified copies of the death certificate(s) to utilize this service.

The penalties for obtaining a record under false pretenses include a fine of not more than \$1,000 or imprisonment in the county jail for not more than one year or both such fine and imprisonment (CRS 25-2-118)

I have read and understood there are penalties for obtaining a record under false pretenses

CHECKLIST►

TO AVOID DELAY SEND THE FOLLOWING

1. Form to Correct a Colorado Death Certificate

2. Documentary Evidence

□ 3. **ID, return your request with a copy of your driver's license, state ID, passport or other acceptable ID **− 4. F**ee's