



# Application for a Death Certificate

County of Monroe, State of West Virginia

Donald J. Evans, County Clerk



\_\_\_\_\_  
Full Name Of Person on Certificate

\_\_\_\_\_  
Date of Death

\_\_\_\_\_  
Requestor's Name:

\_\_\_\_\_  
Reason For Request:

Requestor's Relationship: (Please Check One)

Parent

Grandparent

Child of decedent

Spouse

Personal representative of the estate

Other (Please Describe): \_\_\_\_\_  
\_\_\_\_\_

By my signature, I certify that the above marked relationship is true.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

Requesting \_\_\_\_\_ copies at \$5.00 per copy. Total amount due \$\_\_\_\_\_

Please send check or money order. Make checks payable to: **Monroe County Clerk**

Print your address below:

\_\_\_\_\_  
Daytime Phone Number

If you are making a request by mail, please enclose this form with a  
Check or money order and a copy of your driver's license to:

**Monroe County Clerk (304) 772-3096**  
**PO Box 350**  
**Union, WV 24983**