

Death Certificate Request for Arizona Vital Records

Print and fax the following form, along with copy of government issued photo ID and entitlement requirements, to **866-346-1904**.

**PLEASE READ THE FOLLOWING INSTRUCTIONS CAREFULLY REGARDING
YOUR ENTITLEMENT TO THE RECORD YOU ARE ORDERING.**

Arizona is a "closed record" state, which means that vital records are not public record. **Only persons 18 years of age or older** may obtain a certified copy of a birth certificate. Your order will not be processed until the following entitlement requirements have been met.

RELATIONSHIP TO REGISTRANT	ENTITLEMENT REQUIREMENTS
Parent of the registrant	You must provide a copy of the decedent's birth certificate proving you are the parent. Your name must appear on the decedent's birth certificate as the mother or father. In addition, you must provide a copy of your government issued photo ID and signature on the following Authorization Form.
Surviving spouse	You must provide a copy of your marriage certificate proving you are the spouse of the decedent.
An adult child of the registrant	You must provide a copy of your birth certificate proving you are the child of the decedent. You must also provide a copy of your government issued photo ID and signature on the following Authorization Form.
An adult brother or sister	You must provide a copy of your birth certificate and the decedent's birth certificate proving that you are the registrant's sibling. In addition, you must provide a copy of your government issued photo ID and signature on the following Authorization Form.
An attorney, funeral director or other person acting directly for them	You must provide documentary evidence of your status. You must also provide a copy of your government issued photo ID and signature on the following Authorization Form.
A city, county, state or federal governmental agency needing proof of death for official purposes	You must provide documentary evidence of your status. You must also provide a copy of your government issued photo ID and signature on the following Authorization Form.
An insurance company, bank or hospital which require a certified copy of a death certificate for business purposes	You must provide documentary evidence proving that the deceased maintained business relations with your company. You must also provide a copy of your government issued photo ID and signature on the following Authorization Form.
An attorney, executor of an estate or individual processing a claim regarding the estate of the deceased	You must provide documentary evidence proving interest and the need for a certified copy of the death certificate. You must also provide a copy of your government issued photo ID and signature on the following Authorization Form.
A family member or relative engaged in research for genealogical purposes	You must provide proof of your relationship to the decedent (i.e. birth certificate). You must also provide a copy of your government issued photo ID and signature on the following Authorization Form.
A government or private agency or individual engaged in research for medical or scientific purposes	You must submit a written request directly to Arizona Vital Records, 1818 West Adams Avenue, Phoenix, AZ 85007.
Other	You must provide an authorization letter, signed by the surviving spouse or other entitled adult member of the deceased's immediate family, stating that it is permissible for Arizona to release a copy of the record to you. In addition, you must provide a copy of your government issued photo ID.



Death Certificate Request for Arizona Vital Records

Print and fax this completed form, along with copy of government issued photo ID and entitlement requirements, to **866-346-1904**.

Certificate Information

Decedent's Name: _____
(First) (Middle) (Last)

Spouse's Name: _____
(First) (Middle) (Last)

Date of Death: ____ / ____ / ____ **Gender:** Male / Female **County/City of Death:** _____

Reason for Request: _____ **Number of Copies:** _____
*(First copy - \$10)
(Add'l copies - \$10)*

Applicant / Shipping Information

Your Relationship to the Decedent: Mother Father *Spouse *Other (Specify): _____
**See previous page for Entitlement Requirements*

Applicant's Name: _____
(First) (Middle) (Last)

Shipping Address: _____

City: _____ **State:** _____ **Zip:** _____

Daytime Phone: _____ **Email Address:** _____

Shipping Method: All certificates are shipped via express courier (\$14.00). A signature is required upon delivery.

Billing Information

<u>Order Fees</u>	
First Copy	\$ <u>10.00</u>
Add'l Copies (\$10 ea.)	\$ _____
VitalChek Fee	\$ <u>8.00</u>
Shipping Fee	\$ <u>16.00</u>
<small>*Add'l fees apply to international shipments</small>	
Total	\$ _____

Card Number: _____ **Exp. Date:** ____ / ____

Cardholder's Name: _____

Billing Address: _____

City: _____ **State:** _____ **Zip:** _____

Your credit card will not be charged and your order will not be processed until your photo ID and proof of relationship have been received. Please fax this documentation along with this application.

Cardholder's Signature: _____ **Date:** _____

Applicant's Signature: _____ **Date:** _____

PLEASE ALLOW 3 – 5 BUSINESS DAYS FOR PROCESSING.

Death Certificate Request for Arizona Vital Records

Print and fax this form, along with your completed application, to **866-346-1904**.

Vital Records Authorization Form
ARIZONA VITAL RECORDS
1818 West Adams Avenue, Phoenix, AZ 85007

Note: Your credit card will not be charged and your order will not be processed until the following steps have been completed.

INSTRUCTIONS:

1. Verify that all information on your application is correct.
2. Photocopy form placing valid government issued photo ID with visible signature (*i.e. driver license, Federal ID, passport*), in the space provided below.
3. Sign and date the photocopied form.
4. Fax your completed application form and this Authorization Form, including your entitlement documents (*if applicable, entitlement requirements provided on previous page*) to **866-346-1904**.

APPLICANT'S PHOTO IDENTIFICATION AND SIGNATURE REQUIRED

IMPORTANT!

A copy of both the front and back of your photo ID is required.

**When making a copy of your photo ID in this section,
enlarge and lighten to produce a clear copy.**

**To ensure the copy that you fax is clear and legible,
set the fax machine to PHOTO or FINE RESOLUTION mode.**

DARK, UNCLEAR COPIES WILL NOT BE PROCESSED.

APPLICANT'S SIGNATURE _____ **DATE** _____

REMINDER: In addition to providing a copy of your government issued photo ID, you must also meet the entitlement requirements described on the previous page.