

DeKalb County Board of Health
DEATH CERTIFICATE REQUEST

The fee for a search of Vital Records has been established by the State Board of Health as twenty-five dollars (\$25.00) effective in this county as of July 1, 2010, in accordance with Section 31-10-27 of the Georgia Health Code. The search fee includes a certified copy of the record, if found. Additional full copies issued at the same time, on the same certificate, are five dollars (\$5.00) each. No personal checks accepted. All fees are non-refundable.

Print legibly and correctly.

YOUR INFORMATION

Your name _____

Your address _____

City _____ State _____ Zip _____

Signature _____ Date _____

Relationship to subject _____ *Present ID to clerk*

DEATH CERTIFICATE REQUEST

Subject's full name _____

Date of death _____

Place of death _____

Reason for request _____

Number of copies 1 2 3 4 5 Other _____

Each search is \$25 and includes one copy, if found.

Additional copies at time of search are \$5 each.

NO PERSONAL CHECKS. FEES ARE NON-REFUNDABLE.

Contact info if requesting by email or fax: (Phone): _____

(Cell): _____

ID Information _____

Search + no copy found _____ Add'l copies@ \$5 each _____

Corrected copies@ \$5 each _____

PAYMENT Cash _____ Credit/Debit _____ Ck/MO # _____ Amount _____

Receipt No. _____