



HOWARD COUNTY HEALTH DEPARTMENT
120 E MULBERRY ST, ROOM #209, KOKOMO, IN 46901
PHONE: (765) 456-2927 PHONE: (765) 456-2400

COMPLETE ALL ITEMS



IDENTIFICATION REQUIRED

Photo Copy – Drivers License or State I.D.

1. Full name of deceased: _____
2. Date of death: _____
3. Place of death (County): _____
4. What is the certificate to be used for? _____
5. Printed name of applicant: _____
6. **Signature of applicant:** _____
7. Mailing address: _____
8. City, State, Zip: _____
9. Phone number: _____ 10. Date: _____

Genealogy Document \$10.00 each

Fee: Certified Death Certificates _____ X \$10.00 each

APPLYING BY MAIL - Enclose a self addressed stamped envelope.

Money Order or Cashier's Check Only (made payable to Howard Co Health Dept)

FOR GENEALOGY ONLY – DEATH (75 YRS OF OLDER)