

ID Number

**City of Orange Township
Community Services
Vital Statistics Division**

Application for a certified copy of a death record

A Certified Copy of a vital recorded event is issued to those individuals who have a direct link to the individual(s) named on the vital record event, as identified in Executive Order 18, and provided that the requestor is able to identify the vital record and can provide proof of this identity and relationship. A Certified Copy will contain the raised seal and can be used for legal or identification purposes.

PLEASE TYPE OR PRINT CLEARLY! ALL ITEMS ARE REQUIRED UNLESS NOTED OTHERWISE.* PROOF OF IDENTITY IS REQUIRED. MAKE CHECK OR MONEY ORDER PAYABLE TO “CITY OF ORANGE”.

Name of Applicant		Relationship to Person Named on Requested Record (Proof may be required)	Why is record being requested? <input type="checkbox"/> Passport <input type="checkbox"/> Driver's License <input type="checkbox"/> School/Sports <input type="checkbox"/> Social Security Card <input type="checkbox"/> Welfare <input type="checkbox"/> Genealogy <input type="checkbox"/> Other
Street Address			
City State Zip Code			
<i>Signature of Applicant</i>			
		Telephone Number	
		Date of Application	
Name of Deceased			No. of Copies
Place of Death (City, Town or Township)			County
Exact Date of Death		Name of Hospital (Optional)	
Mother's Full Maiden Name		Father's Name	
For Local Official Use Only			
Payment Type: <input type="checkbox"/> Cash <input type="checkbox"/> M/O <input type="checkbox"/> Check <input type="checkbox"/> Waived		Payment Amount:	ID Viewed
			Processed By:
Driver's License Number		Passport /Country/Number	