

APPLICATION FOR APOSTILLED/AUTHENTICATED COPY— MICHIGAN DEATH RECORD

Michigan Department of Health and Human Services

PART 1 – APPLICANT INFORMATION (PERSON FILLING OUT THIS FORM)

Applicant's
 First Name _____ Middle _____ Last _____
 Mailing
 Address _____ City _____ State _____ Zip _____
 Daytime Phone w/ area code ***Required** _____ Email _____

PART 2 – DEATH INFORMATION (TO LOCATE RECORD ON FILE)

The name of the person on record and **year of death** are required in order to complete the search. Do not leave these areas blank. If the month and day of death are unknown, we will search the entire year you provide. If you need additional years searched, please see **Part 6** for fee information.

NAME OF DECEASED (at time of death)				First	Middle	Last
DATE OF BIRTH (mm/dd/yy)			DATE OF DEATH (mm/dd/yy)			
DECEDENT'S PLACE OF DEATH		City	County	State		
DECEDENT'S SEX			DECEDENT'S SOCIAL SECURITY NUMBER			
			_ _ _ _ - _ - _ _ _ _ _			
ANY SPELLING VARIATIONS OF DECEASED'S NAME						
DECEDENT'S PARENT'S NAME				DECEDENT'S PARENT'S NAME		
		First	Middle	Last		
		First	Middle	Last		
DECEDENT'S PLACE OF BIRTH		City	County	State		

PART 3 – COUNTRY OF USE REQUIRED
 Apostille/Authentication is for use **outside** of the U.S.

PART 4 – PURPOSE OF REQUEST

PART 5 – APPLICANT SIGNATURE (PERSON FILLING OUT THIS FORM)

By signing, I understand I am agreeing to pay for a search of State of Michigan Vital Records. This does not guarantee that a record will be found. Falsifying an application for a vital record and/or assuming the identity of another person is subject to criminal penalties. Per MCL 333.2894(b) and 445.65.

Your Signature:

(Must be original in ink, by hand) _____ Date: _____

PART 6 – PAYMENT Application Fee includes one Certified Copy or a No-Find Letter

Base Fee (Includes one year search) Must check one →		<input type="checkbox"/> Short Form (without medical info.)	<input type="checkbox"/> Long Form (with medical info.)	\$42.00	\$
Additional Years to Search (If exact death year is unknown)	Specify Years _____		\$12.00 per year	\$	
Additional Apostilled Copies	Specify Quantity _____		\$26.00 each	\$	
Expedited "Rush" Processing	Reduces in-office time. (Does not affect mail time to/from our office)		\$25.00 additional	\$	
CHECK or MONEY ORDER made out to the "State of Michigan" (Request will not be processed if payment is not included in envelope)			Total Amount Enclosed	\$	

SEE NEXT PAGE FOR PROCESSING TIMES AND MAILING ADDRESS

REQUESTING A MICHIGAN DEATH RECORD

The Michigan Vital Records Office has records of deaths that occurred in Michigan and were **filed** with the state since **1867**. Some records were not filed with the state; some records are missing from the pre-1906 files. Death records are not restricted documents in Michigan. Anyone can request that a search be conducted if the application is completed, signed, and submitted with the required fee paid.

Short Form versus Long Form – A short form record includes pertinent facts of who is deceased, when and where the death occurred, but no medical information or manner of death. A long form record includes the full death registration including the medical conditions reported and other circumstances which led to death.

PROCESSING TIMES FOR MAILED REQUESTS

REGULAR SEARCH

Approximately 4 to 6 weeks of in-office processing at MDHHS, plus an additional 1 to 2 weeks at the Secretary of State's Office of the Great Seal. Then sent via regular mail. Completion time may vary, depending on volume of requests received.

EXPEDITED "RUSH" SEARCH

Approximately 2 to 3 weeks of in-office processing at MDHHS, plus an additional 1 to 2 weeks at the Secretary of State's Office of the Great Seal. Then sent via regular mail.

ADDITIONAL INFORMATION: Results are sent USPS First Class Mail, Pre-Paid envelopes will NOT be accepted

If you find that the above processing times do not meet your needs, please visit www.michigan.gov/vitalrecords or call our Eligibility Unit at **517-335-8666** to speak with a customer service representative about available options.

MAIL APPLICATION (WITH CHECK OR MONEY ORDER)

REGULAR MAIL TO:
Vital Records Requests
P.O. Box 30721
Lansing MI 48909

RUSH MAIL TO:
Vital Records RUSH
P.O. Box 30721
Lansing MI 48909

ALTERNATIVE ORDERING OPTIONS

ONLINE or PHONE

To place an order through our authorized service provider, VitalChek, visit www.michigan.gov/vitalrecords or call **866-443-9897**. Michigan Vital Records orders placed through VitalChek have Regular, Expedited, and Expedited + UPS delivery options available. Pricing will vary when ordering online or by phone and will include VitalChek's processing fee. A credit or debit card is required for payment at the time of ordering.

The Michigan Department of Health and Human Services (MDHHS) does not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, genetic information, sex, sexual orientation, gender identity or expression, political belief, or disability.

DCH-0569-DX-AUTH (Rev. 02/2025) By Authority of MCL 333.2882(1)(a)(b) and MCL 333.2891(1-4) (8)