

Tipton County Death Certificate Application

Send completed application with payment and copy of ID to:

Tipton County Health Department
101 E Jefferson Street
Tipton, IN 46072

For more information, contact the Vital Records Registrar at (765) 675-8741.

IDENTIFICATION IS REQUIRED per IC 16-37-1-7. Please present your driver's license or state ID and the driver's license or state ID for signatory to any checks submitted for payment. Mailed applications must be sent with a photocopy of all identification for the applicant and the check signatory.

Full name at death: _____	Date of death: _____
Was this a stillbirth or fetal death? YES NO	
Place of death (if residence, give address): _____	
Mother's full maiden name: _____	
Father's full name: _____	
Relationship to this person: SPOUSE PARENT CHILD SIBLING	
GRANDCHILD AUNT/UNCLE ATTORNEY OTHER: _____	
Purpose for which record will be used: INSURANCE ESTATE SETTLEMENT	
PERSONAL RECORD OTHER: _____	
Mailing address: _____	
Daytime phone number: _____	
Driver's license or ID number and expiration date: _____	
If alternate identification is being used, at least two forms should be presented. Please state which alternate forms of identification are being used:	

Please select the number of each record to be purchased. Certified death certificates are \$10.00 each and are payable by cash, check, money order, or debit/credit cards.

Number of Certified Death Certificates: _____

Printed name: _____

Signature: _____

Date: _____

<u>Payment Information</u>	<u>Issuance Information</u>
Amount: \$ _____	Date received: _____
Form of payment: Cash Check Money Order Debit/Credit	Date mailed to applicant: _____
	Issued by: _____