

**DEATH CERTIFICATE APPLICATION  
MONROE COUNTY, ROCHESTER, NY - DISTRICT 2700**

**DECEASED NAME:**

**DATE OF DEATH:**

**NUMBER OF COPIES:**

\*\* Certified copies are \$30 each. (ex. 2 copies = \$60) Please send check or money order only. **DO NOT MAIL CASH**

**PLEASE CHOOSE:**                    **WITH CAUSE OF DEATH (Recommended)**  
   **WITHOUT CAUSE OF DEATH**

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**APPLICANT INFORMATION**

**APPLICANT'S NAME:**

**RELATIONSHIP:**                    **CHILD**                    **PARENT**                    **SIBLING**  
   **EXECUTRIX**                    **ATTORNEY**                    **AGENCY**  
   **Other**

**STREET ADDRESS:**

**CITY, STATE, ZIP**

**PHONE NUMBER:**

**SHIPPING:**                    **USPS First Class Mail - No Charge**  
   **USPS Priority Mail Flat Rate - \$10.00 additional**  
   **UPS Overnight Delivery - \$30.00 additional**

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In order to process your request you must submit the completed application along with a copy of your photo ID and a check or money order for \$30 (per copy requested) plus any additional shipping charges if applicable to:

Monroe County Vital Records  
111 Westfall Road - Room 147  
Rochester, NY 14620  
Attn: Death Record Request

Incomplete applications will delay your order. If you have any questions about your order, please contact our office at (585) 753-5138.

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