

State of Nevada  
Health Division  
Bureau of Health Planning and Statistics  
Office of Vital Records and Statistics  
505 E. King Street, Room 102  
Carson City, Nevada 89701-4749  
Telephone (775)684-4242 Fax (775)684-4156

**DEATH CERTIFICATE APPLICATION**

- \$10.00 per certified copy ..... No of copies .....
- \$8.00 search fee (when no record found) ..... No of copies .....
- \$8.00 per verification of a record (no copy issued) ..... No of copies .....

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**\*\*\*\*PHOTOCOPY OF APPLICANT'S ID /DRIVERS LICENSE\*\*\*\***  
**\*\*\*\* IS REQUIRED TO OBTAIN CERTIFICATE\*\*\*\***

Full name of decedent .....

Date of death ..... Social Security No. ....

Place of death .....

Decedent's father's name .....

Decedent's mother's *maiden* name .....

Mortuary/Funeral Home in charge of arrangements .....

NRS 440.650 and NAC 440.070 require that a **relationship** or a need to facilitate a **legal process** be established in order to receive a certified copy of a record. **Please state your relationship and your legal need for this record:**

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Signature of applicant .....

Name and mailing address (please print) .....

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**FOR OFFICE USE ONLY**

Amount received ..... Receipt number .....

No. of copies issued ..... Date .....