



Wayne County Clerk Death Certificate Application



(LexisNexis VitalChek Network Inc. is in partnership with the Wayne County Clerk to enable enhanced electronic processing of mail-in vital record applications.)

Please follow the instructions below when submitting your application.

Before completing your request, please note the following information:

- For City of Detroit death certificates, please use the CITY OF DETROIT Death Certificate Application (http://vitalchek.com/Fax-Phone/MI_DETROIT_DEATH_Applications.pdf)
- THE WAYNE COUNTY CLERK MAY, AT ANY TIME, REQUEST ADDITIONAL DOCUMENTATION TO HELP DETERMINE THE IDENTITY OR ELIGIBILITY OF THE APPLICANT.

SEND WITH COMPLETED APPLICATION

1. For each individual certificate being requested, the following information must be submitted:

- A separate application form must be sent for each person's requested certificate.
- Payment must be included for the total request, including a separate VitalChek Processing Fee for each individual application.
- If you are submitting multiple applications at the same time, all with the same delivery address, you will only need to include payment for one (1) Delivery Method, not one for each individual application.

2. Please mail your completed application to:

**Vital Record Mail Services
ATTN: Wayne County Clerk
P.O. Box 222130
El Paso, TX 79912**

**For expedited order placement and processing
please visit www.VitalChek.com.**

3. Please allow 5 - 7 business days for your application to be received prior to calling our customer service department with any questions about your application. We can be reached at 866-585-2258.

IDENTITY THEFT PROTECTION ACT 445.65(1) and 445.69(1) prohibit anyone from obtaining a vital record by misrepresenting a person's identity or attempting to use another person's identifying information. A person who violates this law is guilty of a felony punishable by imprisonment for up to 5 years or a fine of up to \$25,000 or both.



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FOR VITALCHEK USE ONLY

Order # _____

NOTE: DO NOT USE THIS FORM FOR CITY OF DETROIT REQUESTS – please use the separate City of Detroit Application.

STEP 1: CERTIFICATE INFORMATION

Full Name of Person at Time of Death (Certificate Holder)			
first name	middle name	last name	suffix
Date of Death (MM/DD/YYYY)	City of Birth (NO DETROIT DEATHS)	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	
Reason for Request			

STEP 2: YOUR INFORMATION AND SHIPPING ADDRESS

Your Full Name (Applicant)			
first name	middle name	last name	suffix
Your Street Address	City	State	Zip Code
Your Relationship to Person Named on Certificate	E-mail Address (for communication & status updates)		Daytime Phone Number
Name and Address to Send Certificate (if different than noted above)			
first name	middle name	last name	suffix
Ship To Address	City	State	Zip Code
Your Signature (Applicant)			Date of Application

STEP 3: COST

Certificate Costs <input type="checkbox"/> Certified copy (1 st copy) = \$22.00 <input type="checkbox"/> ___ Additional copies = \$7.00 ea <input type="checkbox"/> Death Search = \$3.00 VitalChek Processing & Handling (non-refundable)	TOTAL A = \$ _____ TOTAL B = \$ 6.50	Delivery Method * <input type="checkbox"/> UPS Next Day Air = \$17.50 <input type="checkbox"/> UPS Second Day Air = \$10.00 <input type="checkbox"/> UPS Canada or Mexico = \$23.00 <input type="checkbox"/> UPS Alaska, Hawaii, Puerto Rico = \$22.00 <input type="checkbox"/> UPS Worldwide Expedited = \$34.50 <input type="checkbox"/> U.S. Postal Service Regular Mail = \$ 0.00 <small>UPS will not deliver to a P.O. Box. Processing time may take 7-10 business days. * If submitting multiple applications at one time, all with the same delivery address, only include payment for one (1) Delivery Method, not one for each application.</small>	TOTAL C = \$ _____* TOTAL AMOUNT DUE (A+B+C) = \$ _____
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STEP 4: PAYMENT INFORMATION

Select Payment Method: DO NOT SEND CASH Submit separate payment for each Application

Credit Card Credit Card # _____ Expiration Date _____ Cardholder Signature _____

Charges will appear on your Credit Card statement as: VCN*WAYNECOMAILROOM

Personal or Business Check If paying by personal or business check, please make payable to VITALCHEK.

STEP 5: MAIL YOUR SIGNED AND COMPLETED FORM

Please mail your completed form, along with ID and additional documentation (if required) to:

Vital Record Mail Services
 ATTN: Wayne County Clerk
 P.O. Box 222130
 El Paso, TX 79912

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