

APPLICATION FOR SEARCH OF DEATH RECORD FILES

PLACE OF DEATH MUST BE IN FULTON COUNTY

NAME OF DECEASED (First, Middle, Last)	
DATE OF DEATH (Month, Day, Year)	

INDIVIDUAL REQUESTING COPIES

PRINT NAMEADDRESS	
CITYSTATE ZI	P
PHONE NUMBER	Number certified copies requested
SIGNATURE	
RELATIONSHIP TO DECEASED	Date:

IMPORTANT

Fulton County Health Department has death records for the year 2008 to current. Prior records may only include name of deceased, place of death and date of death. Death records are not public records and are only available to those who have a personal or property right interest with the decedent. If you are not a relative of the deceased person, a letter or document from the office or agency that needs the death certificate must accompany the request.

Fulton County Health Department accepts cash, check, and debit/credit cards (ALLPAID charges a fee for debit and credit transactions)

Make checks payable to: FCHD or Fulton County Health Department