

REQUEST FOR CERTIFIED COPIES OF DEATH RECORD



City of Livonia
Clerk's Office – Vital Records
33000 Civic Center Drive
Livonia, Michigan 48154
734-466-2229

Monday - Friday 8:30 AM to 5:00 PM

\$15.00 FOR ONE (1) COPY; \$5.00 EACH ADDITIONAL COPY (*SAME RECORD, SAME ORDER*)
ALL COPIES ARE CERTIFIED
CASH, CHECK, MONEY ORDER, CREDIT CARD (IN-PERSON)

Name of Deceased: _____

Date of Death _____

Place of Death _____

NUMBER OF CERTIFIED COPIES REQUESTED: _____

Name: _____
(First) (Last)

Address: _____
(Number/Street) (City/State) (Zip)

Phone Number: _____

Signature: _____ Date: _____

If requesting by mail please send:

1. This completed application
2. Check or money order **ONLY** for full amount **PLUS** additional **\$1.00** for postage, made payable to: **City of Livonia**

To: City of Livonia
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