



Huron County Public Health Vital Statistics Records Request Instructions

**Notice to All
Vital Statistics
Customers:**

Pursuant to Ohio Revised Code 3705.29, it is unlawful to purposely obtain, possess, use, sell, furnish, or attempt to obtain, possess, use, sell, or furnish to another for the purpose of deception any certificate, record, or certified copy of it that relates to the birth of another person, whether living or dead.

Who can order a Record:

Vital records (records of births, deaths, and fetal deaths) are public records in Ohio. This means that anyone who can submit the basic facts of a record may request a copy.

Placing an Order:

For the fastest response, we recommend placing your order in person. See our website at www.huroncohealth.com or call our office at 419-668-1652, option 3, for detailed instructions and further explanation of these options.

The Ohio Department of Health, Vital Statistic site can be accessed at www.odh.ohio.gov/vs or call their customer service team at (614) 466-2531 for detailed instructions and further explanation of these options.

Please complete one application form for each record or search requested. Please submit your applications with all available identifying information. If you do not have sufficient information to allow us to identify the certificate, you may request a search be performed, rather than requesting a certified copy of the record.

Birth Certificates:

Please complete the "Record Information" portion of the application with the information as you believe it to be listed on the original birth record. If there have been any changes to the name of the person on the record, also provide the new name. Please identify the parents on the record as "mother", "father", or "parent", and provide their names prior to their first marriage (also known as maiden name). Birth records will be issued as certified abstracts unless you indicate that you are requesting the certified copy for the specific purposes of obtaining dual citizenship, international marriage or legal proceedings, passport or genealogy.

Death Certificates and Social Security Numbers:

As of October 15, 2015, for the *first five years after the date of death* the social security number of the deceased will not be included on the death certificate unless the requestor is:

- The decedent's spouse or lineal descendant
- The decedent's executor, attorney, or legal agent
- A representative of an investigative government agency
- A private investigator
- A funeral director (or agent responsible for disposition of the body) acting on behalf of the deceased's family
- A veteran's service officer
- An accredited member of the media

Individuals requesting a death certificate with the social security number included must indicate on their application that they are requesting the SSN be included, and submit satisfactory identification to the registrar or clerk

Fees:

In accordance with section 3705.24 of the Ohio Revised Code, we are required by law to charge a fee for each certified copy of a vital record issued. The fee at this office for each certified copy of a birth, death, or fetal death record is \$25.00 per certified copy. We accept credit card payment over the phone or in person only and an additional fee will be charged.



Huron County Public Health Office of Vital Statistics

APPLICATION FOR CERTIFIED COPIES

Walk-In Service

Monday: 9:00am – 4:00pm

Tuesday – Friday: 8:00am – 4:00pm

Huron County Public Health

28 Executive Drive, Norwalk, OH 44857

Telephone: 419-668-1652 ext. 244

Online Order

Scan QR codes below or visit

<https://huronoh.permitium.com/rod>

Birth Certificate



Death Certificate



Mail-In Order

Send completed application and required fee to:

Huron County Public Health

28 Executive Drive

Norwalk, OH 44857

REGISTRANT INFORMATION (Information about person whose vital record is being requested.)

Select a Copy

☐ Birth

\$25.00/copy

☐ Death

\$25.00/copy

☐ Fetal Death

\$25.00/copy

Full Name:

Place of Birth/Death (City, County in Ohio):

Date of Birth/Death:

Full Maiden Name of Mother (Prior to first marriage):

Full Name of Father:

Please indicate any corrections or legal changes made to certificate:

CHARGES

Total number of copies of birth, death, or fetal death:

____ x \$25.00 =

\$

- An additional fee applies to credit and debit card orders
- A \$6.00 mailing fee applies to mail-in orders

TOTAL

\$

APPLICANT INFORMATION (please print clearly as this address will be used for mail order delivery.)

Applicant Name:

Phone Number:

Street Address:

City, State, Zip Code:

Signature of Applicant

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FOR OFFICE USE ONLY:

Date:

Certificate Number:

Method of Payment:

☐ Cash ☐ Check ☐ Credit Card

An equal opportunity provider of employment and services.

