



Clinton County Health Department

1234 Rossville Avenue, Suite B, Frankfort, IN 46041
Phone: 765-659-6385 Ext. 1304 Fax: 765-659-6387



Application for Certified Death Certificate

A photocopy of your driver's license for identification purposes is required. You may submit both the application and ID either by mail or email.

Today's Date _____

Name of Deceased _____

Date of Death _____ Place of Death _____

Name of Applicant _____

Relationship to Deceased _____

Purpose Certificate will be used for _____

Applicant's Signature _____

Applicant's Address _____

Phone Number _____

\$15.00 per copy

Total Certificates Requested _____

Total Fee Due _____

We accept cashier's check, money orders and credit card payments

Melissa M. Pearson, MD
Health Officer

Rodney P. Wann
Administrator