



Public Health
Prevent. Promote. Protect.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
VITAL RECORDS

155 North First Avenue, Suite 170, MS 5 - Hillsboro, OR 97124

Email: mvitalrecords@washingtoncountyor.gov

Telephone: 503-846-3538

www.washingtoncountyor.gov/vital-records

DEATH RECORD ORDER FORM

IMPORTANT INFORMATION

You may apply to Washington County for a record up until the **last day before six months from the date of death and for deaths within WASHINGTON COUNTY**. For example, if the death occurred on January 10, you can apply for a record from Washington County until July 9 during our regular weekday business hours only. **See Ordering Information on page 2. For ordering certificates over 6 months from date of death, see Additional Information on page 2.**

DECEDENT'S INFORMATION

Decedent full LEGAL name _____
First Middle Last

Date of Death _____ Spouse of Decedent _____
Month / Day / Year

Location/Address of Death _____ City of Death _____

APPLICANT INFORMATION

Full LEGAL Name (print) _____ Signature: _____

Your relationship to Decedent: _____ Reason for ordering record: _____

* Please provide a copy of how you are related to Decedent. i.e. birth certificate, marriage license, divorce decree or copy of will listing you as executor.

Street/Mailing Address _____

City _____ State _____ Zip Code _____

Daytime Phone Number _____ Email _____

FEE/ORDER INFORMATION

_____ **SHORT FORM/FACT OF DEATH** (used for property transfer, terminate accounts, legal need unrelated to cause of death)
Quantity

_____ **LONG FORM WITH CAUSE OF DEATH** (used for insurance and benefit claims related to cause of death)
Quantity

CERTIFIED DEATH RECORD FEE:
\$25 each record

Total certified record(s) _____ x \$25 _____
Quantity

CORRECTED CERTIFIED RECORD FEE:
\$5 each replacement

Replace corrected record _____ x \$5 _____
Quantity

TOTAL FEE ENLCOSD _____

FOR OFFICE USE ONLY

Fee Rec:	Cash/Ck/Mo/CC:	Date Rec:
Rec By:	Date Complete: Date Mailed/Pick up:	ID: Exp. Date:
<input type="checkbox"/> Entered in OVERS _____ <input type="checkbox"/> Entered in Sequel/Transaction #: _____		

ORDERING INFORMATION

ORDER BY MAIL

ADDRESS: Washington County HHS-Vital Records
155 N First Ave., Suite 170, MS 5, Hillsboro, OR 97124

INCLUDE: **Completed order form, payment & photocopy of valid ID/documents**

PAYMENT: Check or money order payable to: **Vital Records**
(do not send cash)

ORDER IN PERSON

ADDRESS: Washington County HHS-Vital Records
155 N First Ave., Suite 170, Hillsboro, OR 97124

BRING: **Completed order form, payment & original valid ID/documents**

HOURS: 8:30 a.m.-4:30p.m. Monday through Friday

PAYMENT: Credit card, cash, check or money order payable to: **Vital Records**

REQUIRED ADDITIONAL INFORMATION

In accordance with law - ORS 432.380 access to death records is restricted for 50 years to immediate family members, legal representatives, government agencies, persons licensed or registered under ORS 703.430 and persons with a personal or property right. Legal guardians must provide a copy of the legal document. **Proof of eligibility and relationship ARE required.** Examples are Birth Certificate, Marriage Certificate, Divorce Decree, copy of Will, or document of joint ownership of personal property or accounts. If you are not eligible, provide a written permission note with a notarized signature of an eligible person.

If the decedent's date of death is **more than 6 months**, you will have to order the record from Oregon Health Authority (OHA).

- In person: 800 NE Oregon Street, Room 205, Portland, OR 97232
- By mail: PO Box 14050, Portland, OR 97293-0050
- Online: www.vitalchek.com
- By phone: 1-888-896-4988

CORRECTED RECORD REPLACEMENT INFORMATION

DEATH RECORD REPLACEMENTS: Corrected death records may be replaced in our office upon return of the original record(s) up to the last day of the 5th month from date of death. After 6 months, you will have to replace the records from Oregon Health Authority (OHA) – see below for OHA contact information. **Death record replacements are \$5.00 each.**

APPLICANT IDENTIFICATION REQUIREMENT INFORMATION

In accordance with Oregon Law ORS 432.380, section 2a, in order for a person to obtain a certified copy of a vital record, it is **REQUIRED** that applicants provide valid photo identification and signature before the certificate can be released. When mailing your order, make photocopies of the front and back of your valid ID or documents and include with the order form and payment. **Expired identification documents are unacceptable.**

Acceptable photo identification: Current valid driver's license, ID card or passport

Alternative identification documents: If you don't have a valid driver's license, photo ID card, or passport, please provide **three (3)** different documents from the list below that includes **both your name and at least one showing current address where record(s) will be mailed.** See below for alternative document requirements.

Documents such as:

- Utility bill (for example - telephone, gas, electric, water, garbage removal) or other bill.
- Insurance statement, medical statement, paycheck stub, or monthly account statement.

Above documents must have current mailing address where the record(s) will be mailed and be dated within the last 30 days.

Other documents may be used such as:

- Court or parole documents.
- Valid work ID, unemployment statement, food stamp or other benefit cards (copy front and back).
- Valid permit for firearms, fishing, hunting license.
- Vehicle registration, title or insurance statement.

Expired documents are unacceptable.

For more information on acceptable documents, go to: www.healthoregon.org/chs, click on "Information Needed to Order", and scroll down to "Acceptable Proofs of Identity."

If you have no ID or alternative documents, records can be ordered by an immediate family member, legal representative of a family member or sent directly to a government agency.

WARNING: Providing false information is a felony under ORS 432.993. To screen orders, Vital Records may request more information or other documents to prove eligibility.