

Vital Statistics Application

1840 E. Gypsy Lane Road
Bowling Green, OH 43402
419-354-1050

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BIRTH CERTIFICATE Certified Fee: **\$23.00 per Certificate**

Number of Certified Copies _____
Protective Sleeve (\$1.00) _____

- Examples that certified copies must be used for:
- Passports
 - School Registration
 - Driver's License
 - Traveling Out of the Country
 - Social Security
 - State ID
 - Insurance Purposes
 - Court Purposes

Name on Birth Certificate _____
First Name Middle Name Last Name

Date of Birth _____ County of Birth _____
Month Day Year

Mother's Maiden Name _____
First Name Middle Name Last Name

Father's Name _____
First Name Middle Name Last Name

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DEATH CERTIFICATE Certified Fee: **\$23.00 per Certificate**

Burial Permit Fee: **\$3.00**

Number of Certified Copies _____

Permit Requested: _____

Name on Death Certificate _____
First Name Middle Name Last Name

Date of Death _____ Where Death Occurred _____
Month Day Year

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PURCHASER INFORMATION (Please Print)

Purchaser's Name _____

Address _____ City _____

State _____ Zip Code _____ Phone _____

Signature _____ Date _____

****If purchasing by mail, you must include a self-addressed stamped envelope or your order will not be processed.** We accept cash, checks and debit/credit cards. Checks should be payable to the Wood County Health Department. We accept MasterCard, Visa, Discover and American Express; however, there is a 2.5% fee (a minimum of \$2.00) for this service. All sales are final.

Health Department Use Only

Date Requested _____ Amount Paid _____ Check # _____

Receipt # _____ Certified Paper # _____ Cash _____ CC _____