



Clermont County General Health District
 2275 Bauer Rd., Suite 300
 Batavia, OH 45103
 Phone: (513)732-7499
 Fax: (513)732-7936

Certified Birth/Death Record Request

Select One:

Birth Record \$23.00
per certified copy

Death Record \$23.00
per certified copy

REGISTRANT INFORMATION: (information about person whose vital record is being requested)

Full name: (for birth, indicate child's full name as shown on original birth record):		Date of birth/death
Place of birth/death (City/County in Ohio):		
Full maiden name of mother (prior to marriage)	Full name of father:	
Have there been any corrections or legal changes made to certificate: Yes No	If name was changed since birth, indicate new name:	

CHARGES: CASH OR CHECK ONLY (THIS OFFICE DOES NOT ACCEPT CREDIT CARDS)

Total number of certified records (birth,death)		X \$23.00 =	\$
Burial Permit		x \$3.00 =	\$
TOTAL AMOUNT DUE:			\$

For mail orders, please include a SELF ADDRESSED STAMPED ENVELOPE and a CHECK or MONEY ORDER, (do not send cash), made payable to the "Clermont County Treasurer".

Applicant Name	
Street Address	
City, State Zip	

Applicant Signature	
Phone Number	() -

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 or another person, whether living or dead.

Date received:	Certificate number:
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