

Lawrence County Health Department

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.lawcohd.org or www.odh.ohio.gov/vs or call 740-532-3962 for detailed instructions and further explanation of these options.

Please complete one application form for each record or search requested and 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, 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 person requesting is:

- The deceased's spouse, or lineal descendant
- The deceased'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 cash, money orders, cashiers checks, and debit/credit cards (MasterCard, Visa, and Discover Cards). If applying by mail with a debit/credit card, please complete card information. Please do not send cash in the mail.

APPLICATION FOR CERTIFIED COPIES

Please send completed application with required fee(s) and a stamped, self-addressed envelope to:

Lawrence County Health Department
2122 So. 8th Street
Ironton, OH 45638

For Office Use Only

Order Number:	Date:
State File Number:	Other

RECORD INFORMATION (information about the person on the requested record)

Full name on requested record		If name has changed since birth, indicate new name	
Date of Birth	Date of Death	City and County Where Event Occurred	
<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Parent	Name Before First Marriage	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Parent	Name Before First Marriage
Birth Certificate:	Please Indicate if you are requesting the birth certificate for any of the following purposes: <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> Out-of-Country Marriage <input type="checkbox"/> Genealogy <input type="checkbox"/> International Legal Business		Number of copies of birth records ____ @ \$25 = \$ ____
Death Certificate:	You may request a copy of the death certificate with the SSN included if you are: <input type="checkbox"/> The deceased's spouse or lineal descendant <input type="checkbox"/> The deceased's executor, attorney, or legal agent <input type="checkbox"/> A representative of an investigative government agency <input type="checkbox"/> A private investigator <input type="checkbox"/> A funeral director (or agent responsible for disposition of the body) acting on behalf of the deceased's family <input type="checkbox"/> A veteran's service officer <input type="checkbox"/> An accredited member of the media		Number of copies of death records ____ @ \$25 = \$ ____ <input type="checkbox"/> I request a copy with the Social Security Number included <input type="checkbox"/> No, I do not need the SSN included
Total Amount Due			\$ ____

APPLICANT INFORMATION

Applicant Name		Email	
Street Address		Phone Number	
City, State, & Zip Code		Signature	
If requesting by mail, please indicate payment type: <input type="checkbox"/> Money order <input type="checkbox"/> Cashier's Check <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> Discover Card Card # _____ Exp. Date _____ Sec Code _____ Name on Card _____ Billing Zip Code _____			