

VITAL RECORDS REQUEST

To: Ontonagon County Clerk
County Courthouse
725 Greenland Road
Ontonagon, MI 49953
Phone: (906)884-4255
Fax: (906)884-6796

From:

Name:
Address:
City, State, Zip:
Phone:
Email:
Date of Request:

I am requesting a copy of a: BIRTH RECORD / MARRIAGE RECORD / DEATH RECORD

[Circle Request(s)]

Check Payable to: Ontonagon County Clerk

Fee: \$ 10.00 First Copy
\$ 3.00 Each Additional

Amount Enclosed: \$ _____

Applicant Signature: _____

******* Birth Record Requests require a copy of a photo ID *******

****NOTE** Birth Records are only released to a person named on the record i.e: child or parent or an eligible heir (with a completed Affidavit of Heir available at the Clerk's office) unless the record is at least 100 years old.**

BIRTH

Full Name at Birth: _____

Date of Birth: _____

Mother's Full Name (Maiden): _____

Father's Full Name _____

Relationship to Individual on Record: Self / Mother / Father
[Circle One]

MARRIAGE

Names on Marriage Record: _____

Bride's Last Name at time of Application: _____

Date of Marriage: _____

DEATH

Name on Death Record: _____

Date of Death: _____ Date of Birth: _____
(or approximate age at time of death)