APPLICATION FOR CERTIFIED COPY OF VITAL RECORD

MACON COUNTY REGISTER OF DEEDS

Todd Raby, Register of Deeds

5 West Main St. Office- (828) 349-2095

Franklin, NC 28734 Fax – (828) 349-2403

WARNING: MAKING A FALSE APPLICATION FOR VITAL RECORD IS A FELONY UNDER STATE & FEDERAL LAW

	\$10.00 per certified copy	– 0.25¢ pnotocopy
	DEATH CERTIFICATE	
	Certified:	Photo:
	Full Name of Deceased :	
	Date of Death :	
	THE CERTIFICATE OF THE ABOV	E NAMED PERSON IS FOR:
CHECK ON OF	THE FOLLOWING)	
] Myself	[] Parent/Stepparent/ Grandparent	[] Brother/Sister
] Spouse	[] Child/Stepchild/Grandchild	[] Funeral Director/Licensee
] Authorized Agent/Attorney/Legal Rep		[] Other (Must be approved by office)
l he	ereby certify that all the above information given	is true & correct to the best of my knowledge
Sign, Print and [Date:	
Mailing Address		