



VILLAGE OF LIBERTYVILLE APPLICATION FOR DEATH CERTIFICATE

TO OBTAIN A DEATH CERTIFICATE:

1. Complete this form.
2. **SEND A PHOTOCOPY OF YOUR DRIVERS LICENSE**
3. Enclose a check or money order made payable to:

VILLAGE OF LIBERTYVILLE

Phone (847) 362-2430

\$12.00 - for one certificate

\$ 8.00 - for each additional certificate

No. of Certificates _____

Amount Enclosed _____

4. Mail this form, identification, and check to:

Village of Libertyville
 Attn: Death Certificates
 118 W. Cook Avenue
 Libertyville, IL 60048

PLEASE PRINT

Full Name of Deceased _____
 First Middle Last

Place of Death: _____
 Hospital City, Village or Township County

Date of Death: _____ Date of Birth: _____
 Name of

Spouse: _____

Full name of Father (of deceased): _____

Full name of Mother (of deceased): _____

Reason for Obtaining the Certificate: _____

Death records are not public records and are only available to those who have a personal or property interest with the decedent. Please note that the Village only maintains death records for the past ten years in our office. Older certificates must be obtained at the Lake County Building.:

Signature _____ Relationship _____ Phone _____

YOUR NAME AND ADDRESS

Name _____

Address _____

Office Use Only

Date _____

No. of copies _____

Amt. Received _____