



Application for a Tehama County Death Record

SEAN HOUGHTBY
County Clerk & Recorder

INFORMATION: The Tehama County Clerk-Recorder only has records of death that occurred in Tehama County. For all other records you must contact the county in which the event took place or contact the State Office of Vital Records, P.O. Box 997410, Sacramento, CA 95899. California law (Health & Safety Code Section 103526), permits only authorized individuals as listed on the application to receive certified copies of death records. Those who are not authorized by law to receive an authorized certified copy will receive a certified informational copy with the legend, **“INFORMATIONAL, NOT A VALID DOCUMENT TO ESTABLISH IDENTITY.”** Please indicate the type of certified copy you are requesting:

- ☐ I am requesting a **Certified Authorized** copy ☐ I am requesting a **Certified Informational** copy

Note: Both documents are certified copies of the original document on file with the Tehama County Recorder. With the exception of the legend and redaction of signatures, the documents contain the same information.

To receive an Authorized copy, you **MUST INDICATE YOUR RELATIONSHIP TO THE REGISTRANT** below:

- | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| <input type="checkbox"/> Parent/Legal Guardian of Registrant | <input type="checkbox"/> Grandparent/Grandchild of Registrant |
| <input type="checkbox"/> Spouse/Registered Domestic Partner of Registrant | <input type="checkbox"/> Authorized by Court Order (must have copy of order.) |
| <input type="checkbox"/> An attorney representing Registrant or Registrant's Estate | <input type="checkbox"/> Law Enforcement/Govt. Agency (Conducting Official Business) |
| <input type="checkbox"/> Surviving Next of Kin (specified in HSC §7100) | <input type="checkbox"/> Child/Sibling of Registrant |
| <input type="checkbox"/> An Agent or Employee of a Funeral Establishment (Acting within the scope of employment and on behalf of persons specified in HSC §7100) | |
| <input type="checkbox"/> Power of Attorney/Executor of the Registrant's Estate (Include a copy of the power of attorney or documentation identifying you as executor) | |

Death Record Information (Complete the information below as shown on the death record, to the best of your knowledge.)

Name of Decedent - First	Middle	Last
Date of Death	City of Death	Number of Copies
Mother/Parent Name (First, Middle, Last)		Father/Parent Name (First, Middle, Last)

Applicant Information

1. When Appearing In Person – You will be required to show government issued photo identification and sign the application under penalty of perjury in front of a member of our staff.
2. Mail requests – You will need to sign the penalty of perjury statement in front of a notary public. Please see reverse side for further instructions on notary public.

Name of Person Completing Form		Telephone Number	
Street Address	City	State	Zip Code

I agree not to use the above referenced record obtained from this application or any portion thereof, for fraudulent purposes. I swear under penalty of perjury that I am an authorized person, as defined in California Health & Safety Code Section 103526 ©, and am eligible to receive a certified copy of the record identified on this application form.

Sworn this _____ day of _____, _____. Signature: _____

BELOW SECTION FOR RECORDER'S USE ONLY

Book & Page Number	Bank Note Paper Number(s)	Type of I.D. & Identifying Numbers	Date Processed	Clerk Initials
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INSTRUCTIONS: Use a separate blank application for each record requested. All sections must be completed in their entirety. Please send \$26.00 for each death certificate requested. If no record is found, the fee will be retained for searching as required by statute and a "Certification of No Record" will be sent.

PAYMENT OPTIONS:

Mail Orders – Check or money order. Include with this application sufficient money, in the form of a personal check, postal or bank money order, made payable to the "County of Tehama". Mail this application, sworn notarized statement, along with the fee to the Tehama County Clerk-Recorder's Office, P.O. Box 250, Red Bluff, CA 96080. Please allow 5-10 business days for processing.

Walk-in customers – Check, money order or cash, (same day service)

AUTHORIZED PERSONS: To obtain an Unrestricted Certified Copy of a death record you must be the parent or legal guardian, a child, grandparent, grandchild, sibling, spouse or domestic partner or a funeral director acting on behalf of the registrant. You may also receive the record as a result of a court order, or as an attorney acting on behalf of the registrant or registrant's estate, surviving next of kin, appointed by court to act on behalf of the registrant or registrant's estate or a member of law enforcement or governmental agency who is conducting official business is an authorized person.

Those who are not authorized by law to receive an authorized certified copy will receive a certified informational copy with the legend, "INFORMATIONAL, NOT A VALID DOCUMENT TO ESTABLISH IDENTITY."

If you are submitting your order by mail, you must have your sworn statement notarized using the Certificate of Acknowledgment below

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

CERTIFICATE OF ACKNOWLEDGEMENT

State of _____)
)SS
County of _____)

On _____ before me, _____ personally appeared _____, who proved to me on the basis of satisfactory evidence, to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.
Sean Houghtby
Tehama County Clerk & Recorder

Signature _____ Deputy

SEAL