DEATH RECORD
SEARCH APPLICATION

Mail Application to:
New Mexico Department of Health
Bureau of Vital Records and Health Statistics
PO Box 25767    Albuquerque, NM 87125

Average application processing time is 6-12 weeks.
Processing time is subject to change, dependent on volume of incoming applications.

Warning: False application for a vital record is a criminal offense and punishable by fine and/or imprisonment. New Mexico Vital Records requires a photocopy of your government issued picture identification.

1. APPLICANT: Complete each item on application legibly. An incomplete application will be rejected.

Name of Applicant
Name of Agency (If Applicant is Organization)

Mailing Address (include City, State and Zip code)

Provide physical address, if mailing address is PO box.

Daytime Telephone Number
( )

Alternate Daytime Telephone Number
( )

Only immediate family is eligible to obtain a vital record. Immediate family is defined as registrant’s mother, father, sibling, child, grandchild, current spouse, maternal-grandparent and paternal-grandparent. Father and paternal grandparent are only eligible if father is listed on birth record. Non-immediate family must provide tangible proof of legal interest for requested record.

2. Applicant’s Relationship: What is your relationship to the person on the certificate

☐ Daughter ☐ Son ☐ Mother ☐ Father ☐ Brother ☐ Sister

☐ Grandchild ☐ Current Spouse ☐ Maternal Grandparent ☐ Paternal Grandparent ☐ Other (Specify)

3. Decedent’s Full Name at death: Print First, Middle and Last name of person named on certificate (mandatory)

Date of death: Month/Day/Year (mandatory)
Place of Death: City/County

Social Security Number (if known)

Date of Birth: Month/Day/Year (if known)
Spouse’s Maiden Name (if married at time of death):

Make payment payable to: New Mexico Vital Records. The fee is for the search of the record and will include one certified copy of record, if available. Search fee is non-refundable if record is not filed.

4. Payment & Quantity

Quantity Death Certificate @ $ 5.00:

Quantity Chargeable Amendment @ $ 10.00:

TOTAL Fees Enclosed: $

☐ Check ☐ Money Order

Check or Money Order Number:

5. Purpose of Request: Check the reason(s) for use

☐ Amendment to Vital Record ☐ Estate/ Probate ☐ Discharge Loan

☐ Genealogy ☐ Legal ☐ Insurance ☐ Medical

☐ Passport/Visa ☐ Social Security ☐ Tax Purpose

☐ Other (state other reason):

Signature of Applicant

Date of Application

New Mexico Bureau of Vital Records www.vitalrecordsnm.org 1-866-534-0051