County of Bucks

OFFICE OF THE CORONER

850 Eagle Boulevard, Warminster, PA 18974

267-880-5040

County Commissioners
Diane M. Ellis-Marseglia, LCSW, *Chair*
Robert J. Harvie, Jr., *Vice Chair*
Gene DiGirolamo

Medical/Legal Purposes/ Claims Processing (Certified Copies)

Steps for filling out the form:

1. Fill out form online
2. Print entire form
3. Fill in any blanks
4. Include any necessary attachments
5. Mail, Fax or Scan & Email to contact information listed at bottom of page 2.

Please note:

- This form is for Bucks County Cases **only**.
- Please call the Coroner's Office to check availability of reports **before** submitting form.

Part 1: Medical/Legal Purposes/Claims Processing (Certified Copies)

Firm/Company Name: _____

Date: _____

Firm/Company Address 1: _____

Firm/Company Address 2: _____

City: _____

State: _____

Zip: _____

Firm/Company Phone: _____Extension:_____

Contact Name: _____

Title: _____

Reason for Records:

- ◯ Legal
- ◯ Claims Processing
- ◯ Other

If other, please specify: _____

Reason for Records (2):

- ◯ Informational
- ◯ Legal Purposes
- ◯ Medical Purposes
- ◯ Other

If other, please specify: _____

Part 2: Decedent Information

Name of Decedent: _____

Age: _____

Date of Birth: _____

Date of Death: _____

Place of Death (Name of Hospital): _____

Hospital Address: _____

City: _____

State: _____

Zip: _____

Cause of Death: _____

Records Requested:

- ☐ Coroner's Report
- ☐ Autopsy Report
- ☐ Toxicology Report
- ☐ Photos
- ☐ Other

If other, please specify: _____

Fee for Service:*

$100.00 Coroner's Report

$500.00 Autopsy Report

$100.00 Toxicology Report

$25.00 Photographs (per photo)

Call office for availability and number of photos taken.

*Checks for Fees must be enclosed and made payable to: **Bucks County Coroner's Office**

I understand that by signing my name to this application for record or reports generated by the Bucks County Coroner's Office, I certify that the information in which I furnished is correct and truthful to the best of my knowledge, under penalty of law.

Signature: _____

Printed Name: _____

Date Signed: _____

Note: Coroner's Reports prior to 1997 are on microfilm and take approximately one week to retrieve and mail. Death Certificates are **NOT** part of the Coroner's Report. If you need a copy of a death certificate, please contact the Bureau of Vital Statistics at: 1800-842-5040 ext. 3005.

Bucks County Coroner
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