

Application to Local Registrar for Copy of Birth Record

CERTIFICATE INFORMATION

Name			Date of Birth								
First	Middle	Last									
			M	M	D	D	Y	Y	Y	Y	
Place of Birth			(Village, Town or City)						County		
Hospital (If not hospital, give street & number)											
Father			Maiden Name of Mother			First			Middle		Last
First	Middle	Last									

Number of Copies Requested	Enter Birth No. if Known	Enter Local Registration No. if Known
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Purpose for Which Record is Required (Check One)

<input type="checkbox"/> Passport	<input type="checkbox"/> Working Papers	<input type="checkbox"/> Welfare Assistance
<input type="checkbox"/> Social Security-Retirement	<input type="checkbox"/> School Entrance	<input type="checkbox"/> Veteran's Benefits
<input type="checkbox"/> Social Security-SSI	<input type="checkbox"/> Driver's License	<input type="checkbox"/> Court Proceeding
<input type="checkbox"/> Retirement	<input type="checkbox"/> Marriage License	<input type="checkbox"/> Entrance into Armed Forces
<input type="checkbox"/> Employment		
<input type="checkbox"/> Other (Specify) _____		

APPLICANT INFORMATION

NAME			If attorney, give name and relationship of your client to person whose record is required					
FIRST	MIDDLE	LAST						
What is your relationship to person whose record is required?			(name of client)					
<input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Other, specify _____						(relationship)		
Telephone No. ()								
Social Security No.								

Signature of Applicant			Date								
			MM	DD	YY						
Address of Applicant			FOR REGISTRAR'S USE ONLY (Photocopy ID and attach to application form)								
Street			TYPE OF ID			<input type="checkbox"/> Driver's License			State _____ No. _____		
						<input type="checkbox"/> Other ID, specify					
City			State			Zip Code			No. _____		

TYPES OF ACCEPTABLE IDENTIFICATION

1. Driver's license
2. Non-driver's license
3. Passport
4. Naturalization Papers
5. Military ID
6. Employer's Photo ID
7. Two utility bills, showing applicant's name and address
8. Police report of lost or stolen ID

DO NOT ISSUE COPY UNLESS ONE OF THE ABOVE TYPES OF IDENTIFICATION IS PRESENTED