

Application to Local Registrar for Copy of Birth Record

CERTIFICATE INFORMATION

Name			Date of Birth		
First	Middle	Last	MM	DD	YYYY
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
Purpose for Which Record is Required (Check One)		
<input type="checkbox"/> Passport		
<input type="checkbox"/> Social Security-Retirement		
<input type="checkbox"/> Social Security-SSI		
<input type="checkbox"/> Retirement		
<input type="checkbox"/> Employment		
<input type="checkbox"/> Other (Specify) _____		
<input type="checkbox"/> Working Papers		
<input type="checkbox"/> School Entrance		
<input type="checkbox"/> Driver's License		
<input type="checkbox"/> Marriage License		
<input type="checkbox"/> Welfare Assistance		
<input type="checkbox"/> Veteran's Benefits		
<input type="checkbox"/> Court Proceeding		
<input type="checkbox"/> Entrance into Armed Forces		

APPLICANT INFORMATION

NAME		If attorney, give name and relationship of your client to person whose record is required
FIRST	MIDDLE	
What is your relationship to person whose record is required?		<input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Other, specify _____
<input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Other, specify _____		
Telephone No. () - - - - -		(name of client) _____ (relationship) _____
Social Security No. - - - - -		
Signature of Applicant		FOR REGISTRAR'S USE ONLY (Photocopy ID and attach to application form)
Date		
MM DD YY		
Address of Applicant		TYPE OF ID <input type="checkbox"/> Driver's License
Street		<input type="checkbox"/> State _____ No. _____
City		<input type="checkbox"/> Other ID, specify _____
State		No. _____
Zip Code		

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