



APPLICATION FOR CERTIFIED COPY OF BIRTH CERTIFICATE
Please print or type, as all information must be entered into computer

Incomplete information will result in rejection of this application.

Person Making Request form with fields for Legal Name, Date, Phone #, Address, City, State, Zip, Reason for request, and How many copies do you want? Search and/or First Copy \$25 Each Additional Copy \$20

Information about person whose birth certificate is requested - please print

Table for birth information with columns for Full Name at Birth, Date of birth, Place of birth, Name of mother (maiden), Full name of father, and State of Birth.

For Staff Use Only: State File #
Certificate Number: Date Issued: Receipt #: Type Registrar:

Please ensure all information on your certificate is correct before leaving. If you need to correct or exchange a certificate there will be additional charges.

