Vital Record Request Form

Applicant’s Name_________________________________________ Request Date:________________

Address:_________________________________________ City State Zip_____________________

Telephone______________Cell Phone______________E-mail____________________

(Certified Copies $15.00 1st copy, $6 each additional) _____________________________

By signing, I affirm that the information provided is true and correct _____________________________ Signature

Date of Birth, Marriage or Death (if known)_____________________

# of copies requested:_____ Type: [ ] Birth [ ] Death [ ] Marriage

Marriage
Bride’s Name:_________________________________________

Groom’s Name________________________________________

Birth
Name on Birth Record_____________________________________

Mother’s Full (Maiden) Name _____________________________

Father’s Name (If applicable)______________________________

Death Record
Name of Deceased_______________________________________

Indicate Relationship to the person on the requested record
[ ] Self/Spouse
[ ] Parent
[ ] Guardian
[ ] Descendent
[ ] Attorney of Person on Record
[ ] Registered Domestic Partner
[ ] Funeral Home
[ ] Genealogist ID#________
[ ] None*

*If none of the above relationships exist, the ability to obtain a vital record is limited by state statute.

Section Below – For Clerk’s Use Only

One of these ID’s must be provided Or Any Two of these
[ ] Driver’s License
[ ] Utility Bill
[ ] Social Security Card
[ ] Passport
[ ] Bank Statement
[ ] DD214
[ ] Government issued picture ID
[ ] Vehicle Registration
[ ] Hospital; birth worksheet
[ ] Income Tax Return
[ ] License/Rental Agreement
[ ] Personal Check with address
[ ] Pay Stub
[ ] Notarized release (Att’y)
[ ] W2 Form
[ ] Genealogist state issue card
[ ] Funeral home must be provider of death certificate
[ ] Department of Corrections ID Card
[ ] Other

[ ] Disability award from SSA

Clerk’s Initials__________ Vital Records Certificate #’s_____________________

Total Paid $ _______ [ ] Cash [ ] Check #__________ [ ] Credit Card