

**CERTIFICATE INFORMATION**

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

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**

<b>NAME</b> FIRST MIDDLE LAST	If attorney, give name and relationship of your client to person whose record is required				
What is your relationship to person whose record is required? <input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Other, specify _____					
Telephone No. (____) _____	<table border="1"><tr><td>_____</td><td>_____</td></tr><tr><td>(name of client)</td><td>(relationship)</td></tr></table>	_____	_____	(name of client)	(relationship)
_____		_____			
(name of client)	(relationship)				
Social Security No. _____					
Signature of Applicant Date MM DD YY	<b>FOR REGISTRAR'S USE ONLY</b> (Photocopy ID and attach to application form)				
Address of Applicant					
Street City State Zip Code		<b>TYPE OF ID</b> <input type="checkbox"/> Driver's License State _____ No. _____ <input type="checkbox"/> Other ID, specify _____ 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**