## Application to Local Registrar for Copy of Birth Record

CERTIFICATE INFORMATION						
First Middle Name				Date of Birth M M D D Y Y Y Y		
Place of Birth		(Village, Town or City) County				
First Middle Father	Last	Maiden Na of Mother	me First	Middle	Last	
Number of Copies Requested Enter Birth No if Known		0.	Enter Local Registration No. if Known			
Passport						
APPLICANT IN  NAME  FIRST MIDDLE LAST  What is your relationship to person whose record is required?  Self Parent Other, specify		IFORMATION  If attorney, give name and relationship of your client to person whose record is required				
Telephone No. (         )		(name of client) (relationship)  FOR REGISTRAR'S USE ONLY				
		(Photocopy ID and attach to application form)  TYPE OF ID  Driver's License  State No				
Address of Applicant  Street		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