

REQUEST FOR CERTIFIED COPY OF BIRTH CERTIFICATE

1. Full name at birth: _____

2. Date of birth: _____ 3. Place of birth: _____
(City, State)

4. Parent's full name: _____ Birthplace: _____
(State only)

5. Parent's full name: _____ Birthplace: _____
(State only)

This application is for: myself my child my spouse*
 my parent* minor grandchild*

***Must provide documentation of relationship for spouse, parent, grandchild**

**birth certificate [my parent, my grandchild] or marriage certificate [spouse]*

Type of copy desired: Full Size \$20.00 Wallet Size*** \$15.00
(Applicant must be 18 years or older) (Applicant must be 16 years or older)

**Wallet size birth certificate contains less information than the full size certificate. It does not satisfy the proof of identification requirements needed for a passport or a driver's license.

Applicant's Name: _____ Date: _____

Applicant's Signature: _____ Phone: _____

Address: _____

MAIL IN REQUEST:

- Must attach a clear copy of a Gov't issued Photo I.D.
- Must include a Self Addressed Stamped Envelope
- Must include a check or money order (Payable to: Cheshire Town Clerk)
- *Must provide documentation of relationship for spouse, parent, grandchild
**birth certificate [my parent, my grandchild] or marriage certificate [spouse]*

Address: Cheshire Town Clerk
84 South Main St. Phone: (203) 271-6601
Cheshire, CT 06410

***Should a Photo ID be unavailable, Photocopies of TWO of the following are required:**

- ~Social Security Card
- ~Written verification from employer
- ~Copy of utility bill showing name and address
- ~Automobile registration
- ~Checking account deposit slip
- ~Voter registration card

TOWN CLERK USE ONLY

Request received by in-person _____
Request received by mail _____
ID Accepted: _____
Date: _____ Fee: _____