

***** A VALID ID MUST ACCOMPANY ALL REQUESTS FOR BIRTH CERTIFICATES *****

REGISTRAR OF VITAL STATISTICS, 250 MAIN STREET, EAST HAVEN, CT 06512

******* APPLICATION FOR BIRTH CERTIFICATE *******

LEGAL FEE \$20.00 FULL CERTIFIED COPY- Sufficient for all legal transactions, college entrance and identification purposes, State & Government use.

LEGAL FEE \$15.00 WALLET SIZE COPY - Sufficient for Social Security, Drivers License, Working Papers, Proof of Age.

I AM APPLYING FOR A COPY OF THE BIRTH CERTIFICATE OF:

Full name at birth _____ Date of birth ____ / ____ / _____ M___ F___

Place of birth (town) _____ (Hospital or Street & number)

Father's Name _____ Birthplace _____

Mother's first & Maiden name _____ Birthplace _____

I CERTIFY THAT THIS IS...

MY OWN (over 18), MY NATURAL CHILD'S, MY MINOR GRANDCHILD'S,
 THE MINOR OF WHOM I AM GUIARDIAN, MY SPOUSE'S (over 18), MY PARENT'S (over 18),
OR _____

WRITTEN SIGNATURE _____ ADDRESS _____

Date ____ / ____ / ____ Certified copies may only be obtained by those listed above. Be sure to check the correct designation.