

**EAST HAVEN TOWN CLERK
250 MAIN STREET
EAST HAVEN, CT 06512
(203) 468-3201**

APPLICATION FOR COPY OF BIRTH CERTIFICATE

PLEASE PRINT & COMPLETE ALL SECTIONS BELOW.

TODAY'S DATE: _____ METHODS OF PAYMENT: CASH OR CHECK ONLY!

OF COPIES: _____ FULL CERTIFIED COPY LEGAL FEE \$20.00 EACH (The full size birth certificate satisfies all legal transactions.)

OF COPIES: _____ WALLET CERTIFIED COPY LEGAL FEE \$15.00 EACH (The wallet size birth certificate contains less information than the full certificate. It may not satisfy all proof of identification requirements.)

BIRTH CERTIFICATE REQUEST:

FULL NAME ON CERTIFICATE: _____ / _____ / _____
FIRST MIDDLE LAST NAME

DATE OF BIRTH: ____/____/____ SEX: MALE FEMALE

HOSPITAL: _____ TOWN OF BIRTH: _____

FATHER'S FULL NAME:

FIRST MIDDLE LAST NAME

MOTHER'S FULL MAIDEN NAME:

FIRST MIDDLE LAST NAME

PERSON MAKING THE REQUEST:

NAME: _____ / _____ / _____
FIRST MIDDLE LAST NAME

ADDRESS: _____

TOWN/CITY: _____ STATE: _____ ZIP CODE: _____

RELATIONSHIP TO PERSON: SELF PARENT CT MEMBER OF GENEALOGISTS SOCIETY

PROOF OF RELATIONSHIP IS REQUIRED IF YOU ARE THE: SON/DAUGHTER GRANDPARENT GUARDIAN SPOUSE

SIGNATURE OF PERSON MAKING REQUEST:

<p>I. ACCEPTABLE FORMS OF ID : To purchase a birth certificate you would need <u>one</u> of the following listed below:</p> <ul style="list-style-type: none"><i>Current</i> Valid Drivers License<i>Current</i> Non-Driver ID issued by DMV<i>Current</i> Passport<i>Current</i> Valid Military ID <p>OR <u>two</u> (2) forms of the following:</p> <ul style="list-style-type: none">Social Security CardMedical Insurance Card<i>Current</i> utility bill showing name and addressVoter's Registration CardCar Registration showing your name and address	<p>II. FOR MAIL REQUESTS ONLY: Full Size Birth Certificate can only be obtained by the individual if he/she is 18 or over, parent or legal guardian with proof. You must be at least 16 years old to obtain a wallet size.</p> <p>Please make sure to mail the completed request with the following requirements:</p> <ul style="list-style-type: none">Form completed<u>Copy</u> of Acceptable Form(s) of ID. Please refer to part I.Please make check payable to East Haven Town ClerkPlease provide DAY TIME PHONE NUMBER below: <p>Phone Number: (_____) _____</p>
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**WE DO NOT ACCEPT IDENTIFICATION THAT HAS EXPIRED.
MAKE CHECK PAYABLE TO EAST HAVEN TOWN CLERK**