## Registrar of Vital Statistics 165 Church Street Suite 154 New Haven, CT 06510

(203) 946-7931 / Fax (203) 946-7717

## **Birth Certificate Application**

## PLEASE PRINT & COMPLETE ALL SECTIONS BELOW.

I. LEGAL FEES	
TODAY'S DATE: <u>METHODS OF PAYMENT:</u> IF <b>IN-PERSON:</b> CASH, CREDIT OR MONEY ORDER!	
# OF COPIES: FULL CERTIFIED COPY LEGAL FEE \$2	0.00 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.)	
II. BIRTH CERTIFICATE REQUEST	
FULL NAME ON	
CERTIFICATE:/	LAST NAME
	MALE   FEMALE
HOSPITAL: TOWN OF BIRTH:	
FATHER'S FULL NAME:	MIDDLE LAST NAME
MOTHER'S FULL MAIDEN NAME:	
	MIDDLE LAST NAME
III. PERSON MAKING THE REQUEST	
NAME:/	LAST NAME
ADDRESS:	
TOWN/CITY: STATE: _	ZIP CODE:
RELATIONSHIP TO PERSON: ☐ SELF ☐ PARENT ☐ CT MEMBER OF GENEALOGISTS SOCIETY	
OR .	
PROOF OF RELATIONSHIP IS REQUIRED IF YOU ARE THE: ☐ SON/DAUGHTER ☐ GRANDPARENT ☐ GUARDIAN ☐ SPOUSE	
SIGNATURE:	
	: FOR MAIL REQUESTS ONLY
To purchase a birth certificate, you need a HARD COPY of one of the following listed below:  Current Valid Driver's License Current Passport Current Non-Driver ID issued by DMV Current Military ID	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.  Please make sure to mail the completed request with the following requirements:  Form completed
OR two (2) of the following in HARD COPY form only:  Social Security Card  Current utility bill showing name and address within last 90 days  Paycheck or Stub from last 90 days or employment photo ID  Voter's Registration Card  Car Registration showing your name and address  Valid government issued trade license or permit  Birth Certificate of the Requester  Current school photo ID	<ul> <li><u>Copy</u> of Acceptable Form(s) of ID. Please refer to part IV.</li> <li>Money Order <u>only</u> made payable to Vital Records (Please do <u>not</u> mail Cash. Personal Checks are <u>not</u> accepted.)</li> <li>Please provide DAY TIME PHONE NUMBER below:</li> <li>Phone Number: (</li></ul>