REQUEST FOR A CERTIFIED COPY OF A BIRTH RECORD FROM THE TOWN

Mail this request to the Town Vital Records office. For the address and phone number of Town Vital Records offices in Connecticut, please refer to our website at www.ct.gov/dph.

PLEASE PRINT

FULL NAME ON CERTIFICATE*:

FIRST

MIDDLE

LAST NAME

DATE OF BIRTH: _______/_____/______

MONTH

DAY

YEAR

PLACE OF BIRTH: __________________________________________________________

TOWN/CITY

MOTHER/PARENT: __________________________________________________________

FIRST

MIDDLE

LAST NAME (Include name prior to first marriage if applicable)

FATHER/PARENT: __________________________________________________________

FIRST

MIDDLE

LAST NAME (Include name prior to first marriage if applicable)

PERSON MAKING THIS REQUEST:

NAME: ___________________________________________________________________

FIRST

MIDDLE

LAST NAME

ADDRESS: __________________________________________________________________

NUMBER/STREET/UNIT #

TOWN/CITY: __________________________________________________________________

STATE: ___________ ZIP CODE: ___________

TELEPHONE NO: ________________

E-MAIL ADDRESS: __________________________________________________________________

SIGNATURE: X____________________________

RELATION TO PERSON NAMED ON CERTIFICATE: ________________________________

REASON FOR MAKING REQUEST: _______________________________________________

CERTIFICATE SIZE:

☐ FULL SIZE

$20.00 EACH

☐ WALLET SIZE

The wallet size birth certificate contains less information than the full size certificate. It may not satisfy all proof of identification requirements such as those needed for a passport.

$15.00 EACH

TOTAL NUMBER OF COPIES: __________

☐ FULL SIZE

$20.00 EACH

NUMBER OF COPIES: __________

☐ WALLET SIZE

$15.00 EACH

NUMBER OF COPIES: __________

TOTAL: $_______

PLEASE DO NOT MAIL CASH.

Attach a copy of the requester’s valid government issued photo ID or passport below:

Or two (2) forms of the following:

- Social security card
- Written verification of identity from employer
- Automobile registration
- Copy of utility bill showing name and address
- Voter’s registration card

Please make sure to mail the completed request with the following requirements:

☐ Money order made payable to City/Town (check our website stated above)
☐ Current government issued photo ID
☐ (If applicable) verification of relationship to the registrant
   (for example, an individual requesting his/her parent’s birth certificate must provide a certified copy of his/her own birth certificate).

*If adopted, please provide your adoptive name and adoptive parents’ information.
*If you had your name legally changed, please provide a copy of the court documents authorizing the name change.