## **REQUEST FOR BIRTH CERTIFICATE**

SHELTON CITY/TOWN CLERK PO BOX 364 SHELTON, CT 06484 CERTIFIED COPY \$20.00 - CASH/CHECK/CREDIT CARD (PAYABLE TO THE CITY OF SHELTON)

I AM APPLYING FOR THE BIRTH CERTIFICATE OF:

FULL BIRTH NAME:
DATE OF BIRTH:
PLACE OF BIRTH:
MOTHER'S FULL MAIDEN NAME:
MOTHER'S BIRTHPLACE:
FATHER'S FULL NAME:
FATHER'S BIRTHPLACE:
My relationship to the person is:
Myself My Child Grandchild/Grandparent A Person whom I legally represent
My parent Spouse
THE FOLLOWING MUST BE INCLUDED BY THE PERSON MAKING THIS REQUEST:
Photo Identification (drivers license, etc.).  * If unavailable then include photo copies of any 2 of the following:
* Social Security Card
<ul><li>* Written verification of ID from employer</li><li>* Auto Registration</li></ul>
* Copy of Utility Bill showing name and address
*Note: If the relationship is other than my child or myself, you must provide documentation proving the realtionship.  Please note: All of the above requirements are mandated by State Statutes.
I DECLARE UNDER PENALTIES OF FALSE STATEMENT THAT THE ABOVE STATEMENTS AND INFORMATION ARE TRUE AND CORRECT.
SIGNATURE: DATE: