

**REQUEST FOR BIRTH CERTIFICATE**

CITY/TOWN CLERK  
P O BOX 364  
SHELTON, CT 06484

I AM APPLYING FOR THE BIRTH CERTIFICATE OF:

<u>Full Birth Name:</u>
<u>Date of Birth:</u>
<u>Place of Birth:</u>
<u>Mother's Full Maiden Name:</u>
<u>Mother's Birthplace:</u>
<u>Father's Full Name:</u>
<u>Father's Birthplace:</u>

PLEASE STATE THE SIZE OF BIRTH CERTIFICATE REQUESTED:

Long Form \_\_\_\_\_ \$20.00

WALLET Size \_\_\_\_\_ \$15.00

(Cash or Money Order)

My relationship to the person is:

- |                            |                                    |
|----------------------------|------------------------------------|
| Myself                     | My Child                           |
| *My Grandchild/Grandparent | *A person whom I legally represent |
| *My Parent                 | *My Spouse                         |

**THE FOLLOWING MUST BE INCLUDED BY THE PERSON MAKING THIS REQUEST**

1. Photo identification (drivers license, etc.). If unavailable then include originals or photo copies of any 2 of the following:
  - ❖ •Social Security Card
  - ❖ •Written verification of ID from employer
  - ❖ •Auto Registration
  - ❖ •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 relationship.  
Please Note: All of the above requirements are mandated by State Statutes.

<u>Your Name:</u> _____
<u>ADDRESS:</u>
<u>Phone #</u>
<u>Purpose for requesting this birth certificate:</u>

I DECLARE UNDER PENALTIES OF FALSE STATEMENT THAT THE ABOVE STATEMENTS AND INFORMATION ARE TRUE AND CORRECT.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_