

**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](http://www.ct.gov/dph).

PLEASE PRINT

FULL NAME ON CERTIFICATE\*: \_\_\_\_\_  
FIRST MIDDLE LAST NAME

DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_  
MONTH DAY YEAR TOWN/CITY

FATHER'S FULL NAME: \_\_\_\_\_  
FIRST MIDDLE LAST NAME

MOTHER'S MAIDEN NAME: \_\_\_\_\_  
FIRST MIDDLE LAST NAME

**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:**

<input type="checkbox"/> FULL SIZE  <b>\$20.00 EACH</b>  NUMBER OF COPIES: _____	<input type="checkbox"/> 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.  <b>\$15.00 EACH</b>  NUMBER OF COPIES: _____	<b>TOTAL NUMBER OF COPIES:</b>  _____ X \$20.00 = \$ _____  _____ X \$15.00 = \$ _____  <b>TOTAL: \$ _____</b>  <b>PLEASE DO NOT MAIL CASH.</b>
----------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Attach a copy of the requester's valid government issued photo ID or passport below:  Or two (2) forms of the following: <ul style="list-style-type: none"> <li>- Social security card</li> <li>- Written verification of identity from employer</li> <li>- Automobile registration</li> <li>- Copy of utility bill showing name and address</li> <li>- Voter's registration card</li> </ul>	Please make sure to mail the completed request with the following requirements:  <input type="checkbox"/> Money order made payable to City/Town (check our website stated above) <input type="checkbox"/> Current government issued photo ID <input type="checkbox"/> (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. VS-39B REV 8/09  
 \*If you had your name legally changed, please provide a copy of the court documents authorizing the name change.