

APPLICATION FOR COPY OF BIRTH RECORD
New York State Birth Certificate Request Form

Name: _____ Date of Birth: _____
(First) (Middle) (Last)

Place of Birth (e.g. Hospital or Residence): _____

Village, Town or City: _____ County: _____

Father: _____
(First) (Middle) (Last)

Mother: _____
(First) (Middle) (Last)

Number of Copies Requested: _____ ~~XXXXXXXXXXXX~~

Birth Certificate # If Known: _____ Local Register # If Known: _____

Purpose For Which Record is Required (check one):

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Passport | <input type="checkbox"/> Working Papers | <input type="checkbox"/> Welfare Assistance | <input type="checkbox"/> Social Security |
| <input type="checkbox"/> Retirement | <input type="checkbox"/> Driver's License | <input type="checkbox"/> School Entrance | <input type="checkbox"/> Veteran's Benefits |
| <input type="checkbox"/> Employment | <input type="checkbox"/> Marriage License | <input type="checkbox"/> Entrance into Armed Forces | <input type="checkbox"/> Court Proceeding |
| <input type="checkbox"/> Other (specify) _____ | | | |

Describe your relationship to the person whose record is required (If self, state "self"):

If attorney, name and relationship of your client to persons whose record is required:

Client: _____ Relationship: _____

This office requires written authorization of the person/parents whose record is requested before a search is processed.

Signature of Applicant: _____ Date: _____

Street: _____

City: _____ State: _____ Zip: _____

Please PRINT or TYPE name and address where record should be sent:

Name: _____

Street: _____ Phone: _____

City: _____ State: _____ Zip: _____

WHERE TO APPLY: Mail to
Village of Carthage • 120 South Mechanic St • Carthage NY 13619



TYPES OF ACCEPTABLE IDENTIFICATION

- | | |
|--------------------------|--|
| 1. Driver's License | 6. Employer's Photo ID |
| 2. Non-Driver's License | 7. Two utility bills, showing applicant's name and address |
| 3. Passport | 8. Police report of lost or stolen ID |
| 4. Naturalization Papers | |
| 5. Military ID | |

COSTS: \$10.00
Money Order
with a Copy of
Form of ID
REQUIRED!

APPROXIMATE TIME FROM APPLICATION TO ISSUE: One Week
DO NOT ISSUE copy unless ONE of the above types of Identification is present.