REQUEST FOR A CERTIFIED COPY OF A BIRTH RECORD FROM FARMINGTON

Mail to: Farmington Town Clerk's Office, One Monteith Drive, Farmington, CT 06032 Attn: Vital Records			
PLEASE PRINT			
FULL NAME ON CERTIFICATE*:			
DATE OF BIRTH:////////	EAR PLACE	OF BIRTH:	TOWN/CITY
FATHER/PARENT FULL		MIDDLE	LAST NAME
MOTHER/PARENT <u>MAIDEN</u> NAME: FIRST		MIDDLE	LAST NAME
PERSON MAKING THIS REQUEST:			
NAME:			LAST NAME
ADDRESS:			
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	WALLET SIZE		TOTAL NUMBER OF COPIES:
	The wallet size birth certificate contains less information than the full size certificate. It		X \$20.00 \$
\$20.00 EACH	does not satisfy the proof of identification requirements needed for a passport or a		X \$15.00 \$
	driver's license. \$15.00 EACH		TOTAL: \$
NUMBER OF COPIES:	NUMBER OF COPIES:		Checks or Money Orders Do Not Send Cash
ATTACH A COPY OF THE REQUESTOR'S VALID STATE Cash, Checks, and Debit/Credit Cards* Accepted in the Office.			
ISSUED PHOTO ID (passport, license i.e.)			*additional fees apply
OR (if you don't have a valid ID), Two (2) forms of the following:			OR
Social security (SS) card Paycheck Stub or a W-2 form that contains the SS #		<u>Mail</u> the completed request form with the following required	
Current school or college photo ID		documents: Check or Money Order Payable to: Town of Farmington	
Automobile registration			
Copy of utility bill or bank statement showing name and address		Current government issued photo ID and, if applicable, verification of relationship to the registrant.	
 See website <u>ct.gov/dph</u> for other forms of ID accepted 			monomp to the region diffe
*If adopted, please provide your adoptive name and adoptive parents' information *If the requester had a legal name change, please provide a copy of the court documents authorizing the name change.			

 Office Use Only:
 Expires:
 DOB: