REQUEST FOR A CERTIFIED COPY OF A BIRTH RECORD FROM THE TOWN
TOWN OF NEWTOWN, CONNECTICUT 06470

## PLEASE PRINT

FULL NAME ON CERTIFICATE*:

|  |  |  |
| :--- | :--- | :--- |
| FIRST | MIDDLE | LAST NAME |

DATE OF BIRTH: $\prod_{\text {MONTH }} /$
PLACE OF BIRTH:
$\longrightarrow$

FATHER'S FULL NAME: $\qquad$ LAST NAME
MOTHER'S MAIDEN NAME:
FIRST MIDDLE

LAST NAME
PERSON MAKING THIS REQUEST:
NAME: $\qquad$
MIDDLE
LAST NAME
ADDRESS: $\qquad$
NUMBER/STREET/UNIT \#
TOWN/CITY: $\qquad$ STATE: $\qquad$ ZIP CODE:
TELEPHONE NO: $\square$ E-MAIL ADDRESS:

SIGNATURE: X

## RELATION TO PERSON NAMED ON CERTIFICATE:

$\qquad$

## REASON FOR MAKING REQUEST:

## CERTIFICATE SIZE:

| FULL SIZE | WAL <br> The wallet size birth |
| :---: | :---: |
| $\mathbf{\$ 2 0 . 0 0 ~ E A C H ~}$ | information than the <br> dees not satisfy the pr <br> requirements needed <br> driver's license. <br> $\$ 15.00$ |
| NUMBER OF COPIES: | NUMBER OF C |

Or two (2) forms of the following:

- Social security (SS) card
- Paycheck Stub or a W-2 form that contains the SS \#
- Current school or college photo ID
- Automobile registration
- Copy of utility bill or bank statement showing name and address
- See website ct.govidph for other forms of ID accepted

Please mail the completed request with the following required documents:

Town Clerks Office
3 Primrose Street, Newtown, CT 06470
Current government issued photo ID
(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).

