

SHIAWASSEE COUNTY

CAROLINE WILSON
County Clerk
989.743.2242

208 North Shiawassee St. • Corunna, MI
Fax 989.743.2241

HEATHER CRAMER
Chief Deputy Clerk
989.743.2262

APPLICATION FOR A CERTIFIED BIRTH CERTIFICATE

\$15.00 for the first copy and \$5.00 for each additional copy of the same certificate purchased at the same time.

NAME ON CERTIFICATE _____

First

Middle

Last

DATE OF BIRTH _____ PLACE OF BIRTH _____

HAVE YOU EVER BEEN ADOPTED? _____ HAS THERE BEEN A LEGAL NAME CHANGE? _____

MOTHER'S MAIDEN NAME _____

First

Middle

Last

FATHER'S NAME _____

First

Middle

Last

NUMBER OF CERTIFICATES DESIRED: _____

COPIES OF BIRTH CERTIFICATES MAY BE RELEASED ONLY TO THE FOLLOWING:

Please check the one that applies. Proper identification (valid driver's license, with your current, correct address on it) must be presented. If mailing in request, please provide a copy of identification.

_____ The person who is the subject of the record.

_____ A parent named on the certificate.

_____ An heir (if person is deceased and with a copy of death certificate).

_____ Legal Representative, Legal Guardian or Pursuant to a Court Order (must have copy of legal paperwork).

Please be sure you read and understand the following before you sign.

I SIGN THIS DOCUMENT STATING THAT I AM NOT USING THIS CERTIFICATE FOR FRAUDULENT OR DECEPTIVE PURPOSES. 1978 PA 368, as amended (MCL 333.2894)

Signature

Today's Date

Printed Name of Requestor

Address: _____

Phone: _____

NOTE: This document will be retained in the office of the County Clerk indefinitely for purposes of prosecution.