

# Town of Victor - Application for Copy of Birth Certificate

## Information Page

### General Instructions

- Use this application if you are the person named on the birth certificate or the parent of said person.
- If you are **not** the person named on the birth certificate or the parent you must provide a NOTARIZED statement authorizing you to obtain the copy or provide documentation establishing a lawful right or claim (see below).
- **Do not** use this application for genealogy requests.
- Mail or bring in the completed application, copy of your identification, any required documentation, along with payment to: Victor Town Clerk, 85 East Main Street, Victor, NY 14564.
- **No faxed or emailed copies of the application will be accepted.**

### What is a lawful right or claim?

- If the applicant is not the person named on the birth certificate or the parent of said person, a lawful right of claim must be documented. An example of a lawful right or claim would be a birth record needed by the applicant to claim a benefit.
- Documentation would consist of a copy of a court order or an official letter verifying that a copy of the requested birth record is required from the applicant.

### Identification requirements – Application must be submitted with copies:

**Note:** Copy of Passport required if request is made from a foreign country that requires a U.S. Passport for travel.

One (1) of the following forms of valid photo-ID:

- Driver's License
- Non-Driver Photo ID Card
- Passport
- Other government issued photo-ID

### Fees

- Cost is \$10.00 for each certified copy.
- Payments accepted: check, money order or bank check payable to "Victor Town Clerk".
- Credit card payments accepted in person only ( With applicable fees)
- If no record is on file, a "**No Record Certification**" will be issued and the fee returned.

**Note:** If the request is from a qualified applicant that indicates a Post Office Box as their return address, a NOTARIZED signed consent is required.

# Application to Local Registrar for Copy of Birth Record

## CERTIFICATE INFORMATION

Name			Date of Birth		
First	Middle	Last	MM	DD	YYYY
Place of Birth <small>Hospital (If not hospital, give street &amp; number)</small>			(Village, Town or City)		County
Father			Maiden Name of Mother		
First	Middle	Last	First	Middle	Last

Number of Copies Requested	Enter Birth No. if Known	Enter Local Registration No. if Known
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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-Retirement	<input type="checkbox"/> School Entrance	<input type="checkbox"/> Veteran's Benefits
<input type="checkbox"/> Social Security-SSI	<input type="checkbox"/> Driver's License	<input type="checkbox"/> Court Proceeding
<input type="checkbox"/> Retirement	<input type="checkbox"/> Marriage License	<input type="checkbox"/> Entrance into Armed Forces
<input type="checkbox"/> Employment		
<input type="checkbox"/> Other (Specify) _____		

## APPLICANT INFORMATION

NAME

FIRST MIDDLE LAST

What is your relationship to person whose record is required?

Self  Parent  Other, specify \_\_\_\_\_

Telephone No. (\_\_\_\_) \_\_\_\_\_

Social Security No. \_\_\_\_\_

Signature of Applicant \_\_\_\_\_

Date

MM DD YY

Address of Applicant

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

If attorney, give name and relationship of your client to person whose record is required

_____	_____
(name of client)	(relationship)

**FOR REGISTRAR'S USE ONLY**  
(Photocopy ID and attach to application form)

TYPE OF ID

Driver's License  
State \_\_\_\_\_ No. \_\_\_\_\_

Other ID, specify \_\_\_\_\_  
No. \_\_\_\_\_

## **TYPES OF ACCEPTABLE IDENTIFICATION**

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

**DO NOT ISSUE COPY UNLESS ONE OF THE ABOVE TYPES OF IDENTIFICATION IS PRESENTED**