TOWN OF INDUSTRY REQUEST FOR VITAL RECORD

BIRTH CERTIFICATE

Name on birth record:	<u>DEATH CERTIFICATE</u>	MARRIAGE CERTIFICATE
Date of Birth:	Full Name of Decedent:	Full Name of Party A:
Number of Copies Requested?		
Parent 1 Name (birth name):	Date of Death:	Full Name of Party B:
raiont i name (antimame).	Number of Copies Requested?	
Parent 2 Names (birth name):		Date of Marriage:
r arent 2 Names (bitti flame).		Number of Copies Requested?
Applicant Name:	Applicant Name:	Applicant Name:
Applicant Address:	Applicant Address:	Applicant Address:
Applicant Telephone:	Applicant Telephone:	Applicant Telephone:
MUST PROVIDE PROOF OF LINEAGE OR DIRECT	MUST PROVIDE PROOF OF LINEAGE OR DIRECT	MUST PROVIDE PROOF OF LINEAGE OR DIRECT
& LEGITIMATE INTEREST	& LEGITIMATE INTEREST	& LEGITIMATE INTEREST
Indicate your relationship for the record requested	Indicate your relationship for the record requested	Indicate your relationship for the record requested
to establish eligibility:	to establish eligibility:	to establish eligibility:
□ Self	□ Self	□ Self
□ Spouse	☐ Spouse	☐ Spouse
□ Registered Domestic Partner	□ Registered Domestic Partner	☐ Registered Domestic Partner
□ Parent / Step - Parent	☐ Parent / Step - Parent	☐ Parent / Step - Parent
☐ Guardian	☐ Guardian	Guardian
Attorney of name on record	☐ Attorney of name on record	☐ Attorney of name on record
☐ Family Member	☐ Family Member	☐ Family Member
□ Direct & Legitimate Interest	Direct & Legitimate Interest	☐ Direct & Legitimate Interest
☐ Genealogist ID #	Genealogist ID #	Genealogist ID #
By signing below, I swear/affirm that the information above is true and correct. Applicant Signature:	By signing below, I swear/affirm that the information above is true and correct. Applicant Signature:	By signing below, I swear/affirm that the information above is true and correct. Applicant Signature:
Date:	Date:	
\$15 for 1st copy, \$6 for each additional copy	\$15 for 1st copy, \$6 for each additional copy	\$15 for 1st copy, \$6 for each additional copy

<< THIS SIDE TO BE COMPLETED BY TOWN CLERK'S OFFIE STAFF ONLY>>

# OF COPIES ISSUED: PAID: \$	# OF COPIES ISSUED: PAID: \$	# OF COPIES ISSUED: PAID: \$
CONTROL NUMBERS:	CONTROL NUMBERS:	CONTROL NUMBERS:
PROCESSING CLERK'S INITIALS:	PROCESSING CLERK'S INITIALS:	PROCESSING CLERK'S INITIALS:
PROOF OF IDENTITY OF APPLICANT	PROOF OF IDENTITY OF APPLICANT	PROOF OF IDENTITY OF APPLICANT
Applicant Must Provide One of These:	Applicant Must Provide One of These:	Applicant Must Provide One of These:
☐ Driver's License	☐ Driver's License	☐ Driver's License
□ Passport	Passport	Passport
☐ Government Issued picture I.D.	☐ Government Issued picture I.D.	☐ Government Issued picture I.D.
OR Two of These:	OR Two of These:	OR Two of These:
☐ Utility bills	☐ Utility bills	☐ Utility bills
□ Bank statements	□ Bank statements	☐ Bank statements
Vehicle registration	Vehicle registration	Vehicle registration
☐ Income tax return	☐ Income tax return	☐ Income tax return
Personal Check w/ address	Personal Check w/ address	Personal Check w/ address
 A previously issued vital record 	 A previously issued vital record 	 A previously issued vital record
Letter from government agency	Letter from government agency	Letter from government agency
requesting record	requesting record	requesting record
 Department of Corrections I.D. card 	 Department of Corrections I.D. card 	Department of Corrections I.D. card
☐ Social Security Card	□ Social Security Card	☐ Social Security Card
□ DD 214	□ DD 214	□ DD 214
Hospital; birth worksheet	Hospital; birth worksheet	Hospital; birth worksheet
☐ License/rental agreement	☐ License/rental agreement	☐ License/rental agreement
□ Pay stub	☐ Pay stub	☐ Pay stub
□ W-2	□ W-2	□ W-2
Voter Registration card	Voter Registration card	Voter Registration card
Disability award from SSA	Disability award from SSA	Disability award from SSA
☐ Other	☐ Other	☐ Other
ESTABLISHING ELIGIBILITY:	ESTABLISHING ELIGIBILITY:	ESTABLISHING ELIGIBILITY:
☐ Proof of lineage	☐ Proof of lineage	☐ Proof of lineage
☐ Proof of Domestic Partners registration	 Proof of Domestic Partners registration 	☐ Proof of Domestic Partners registration
☐ Attorneys must provide a signed,	☐ Attorneys must provide a signed,	☐ Attorneys must provide a signed,
notarized release from family	notarized release from family	notarized release from family
☐ Genealogists must provide a state-issued	☐ Genealogists must provide a state-issued	☐ Genealogists must provide a state-issued
ID card	ID card	ID card

PROVIDED OR NOTE COCUMENT NUMBERS.

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