



Village of Pelham – 200 Fifth Avenue, Pelham, NY 10803

Application to Local Registrar for Copy of Birth Record

CERTIFICATE INFORMATION			
First Name _____	M	Last Name _____	Date of Birth _____
Place of Birth (Street Address) _____	City _____	County _____	# of Copies _____
Father's First Name _____	Last Name _____	Mother's First Name _____	Last Name (Maiden) _____
<i>Purpose for Which Record is Required (Check Option Below):</i>			
☐ Passport ☐ Social Security ☐ Retirement ☐ Employment ☐ Working Papers ☐ School Entrance	☐ Driver's License ☐ Marriage License ☐ Welfare Assistance ☐ Veteran's Benefits ☐ Court Proceeding ☐ Armed Forces	☐ Other (please specify): _____ _____ _____	
APPLICANT INFORMATION			
First Name _____ M Last Name _____ What is your relationship to person whose record is required? _____ _____		If attorney, give name and relationship of your client whose record is required (signed and notarized authorization letter required). Name of Client _____ Relationship _____	
Address of Applicant _____ City _____ State _____ Zip _____ (____) _____ Telephone No. _____ Email Address _____ _____ - _____ - _____ Social Security No. _____ Signature of Applicant _____ Date _____		<i>For Registrar's Use Only</i> (Photo Copy ID and attach to Application Form) Type of ID: Driver's License State _____ No. _____ Other ID, specify _____ _____ No. _____	

SUBMIT APPLICATION WITH THE FOLLOWING:

- \$10.00 per copy (Check or cash only) Checks to be made payable to the "Village of Pelham".
- Copy of valid Photo Identification
- Self addressed, stamped/return envelope