

APPLICATION FOR CERTIFIED COPY OF VITAL RECORD

MACON COUNTY REGISTER OF DEEDS

Todd Raby, Register of Deeds

5 West Main St.
Franklin, NC 28734

Office- (828) 349-2095
Fax – (828) 349-2403

WARNING: MAKING A FALSE APPLICATION FOR VITAL RECORD IS A FELONY UNDER STATE & FEDERAL LAW

\$10.00 per certified copy – 0.25¢ photocopy

<p>BIRTH CERTIFICATE</p> <p>Certified: _____ Photo: _____</p> <p>Full Name at Birth : _____</p> <p>Date of Birth : _____</p> <p>Father's Full Name : _____</p> <p>Mother's Full Name : _____</p>

THE CERTIFICATE OF THE ABOVE NAMED PERSON IS FOR:

(CHECK ONE OF THE FOLLOWING)

- | | | |
|--|---|--|
| <input type="checkbox"/> Myself | <input type="checkbox"/> Parent/Stepparent/ Grandparent | <input type="checkbox"/> Brother/Sister |
| <input type="checkbox"/> Spouse | <input type="checkbox"/> Child/Stepchild/Grandchild | <input type="checkbox"/> Funeral Director/Licensee |
| <input type="checkbox"/> Authorized Agent/Attorney/Legal Rep | <input type="checkbox"/> Other (Must be approved by office) | |

I hereby certify that all the above information given is true & correct to the best of my knowledge

Sign, Print and Date: _____

Mailing Address: _____