



# Office of the Town Clerk Town of Stafford

Warren Memorial Town Hall  
1 Main Street • PO Box 11  
Stafford Springs CT 06076-0011  
860-684-1765 Fax 860-684-1795

## APPLICATION FOR BIRTH CERTIFICATE

Money Order or Check made payable to "Stafford Town Clerk".

CERTIFICATE SIZE:  Full Certified Copy \$10 each  Wallet Certified Copy \$5 each

[Exact copy of original for Social Security, passport, schools, etc.] [Sufficient for driver's license]

**Access to birth records less than 100 years old is restricted in Connecticut.  
PHOTOGRAPHIC IDENTIFICATION OF APPLICANT IS REQUIRED**

Photo ID may be substituted by any two of the following documents: Social Security card; written verification of identity from employer; automobile registration; copy of utility bill showing name and address; checking account deposit slip stating name and address; voter registration card.

### I am applying for the birth certificate of:

Full Name \_\_\_\_\_  
First Middle Last

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

Place of Birth: \_\_\_\_\_  
Town/State

Father's Full Name \_\_\_\_\_  
First Middle Last

Father's Birthplace \_\_\_\_\_  
State

Mother's Maiden Name \_\_\_\_\_  
First Middle Last

Mother's Birthplace \_\_\_\_\_  
State

**SIGNATURE** of Applicant \_\_\_\_\_ Telephone \_\_\_\_\_

Address of Applicant \_\_\_\_\_

**ATTACH A COPY OF PICTURE IDENTIFICATION**

### I declare this is:

- My own birth certificate
- My child's birth certificate
- My parent's/grandparent's certificate
- My spouse's birth certificate
- My grandchild's birth certificate
- Other \_\_\_\_\_  
(C.G.S. §19a-25; 7-51a; 7-44  
as amended by P.A. 01-163)

Reason for request  
\_\_\_\_\_  
\_\_\_\_\_

### MAIL TO:

Stafford Town Clerk  
PO Box 11  
Stafford Springs, CT 06076

### INCLUDE THE FOLLOWING:

1. Original Application Form
2. Check or Money Order  
Fee: \$10.00 full copy \$5.00 wallet copy
3. Self Addressed Stamped Envelope

**Office Use Only**

Date Received \_\_\_\_\_

Processed By \_\_\_\_\_