

**TRANSYLVANIA COUNTY REGISTER OF DEEDS
VITAL RECORDS APPLICATION
FOR BIRTH, DEATH, OR MARRIAGE RECORDS**

Document Fee Per Copy Certified- \$10.00 Uncertified- \$0.25

If using check or money order make payable to Register of Deeds. Please print or type and be as accurate as possible to help in ensuring that you receive the correct requested documents.

BIRTH CERTIFICATE:

NUMBER OF COPIES: Certified _____ Uncertified _____

Name at Birth _____

Date of Birth _____ County of Birth _____ Sex: Male ____ Female ____

Father/Parent _____

Mother/Parent (Maiden Name) _____

DEATH CERTIFICATE:

NUMBER OF COPIES: Certified _____ Uncertified _____

Full Name of Deceased _____

Date of Death _____

MARRIAGE CERTIFICATE:

NUMBER OF COPIES: Certified _____ Uncertified _____

Applicant 1- Name at Birth _____

Applicant 2/Spouse- Name at Birth _____

Date of Marriage _____ County of Marriage _____

My relationship to the above named person is: (You must provide documentation to prove relationship)

- ☐ **Myself**
- ☐ **My Child**
- ☐ **My Brother/Sister**
- ☐ **My Spouse**
- ☐ **My Parent/Step-Parent**
- ☐ **My Grandchild/Grandparent**
- ☐ **I am an authorized agent, attorney, or legal representative of the person listed above. (Proof required)**

I HEREBY CERTIFY THAT ALL THE ABOVE INFORMATION GIVEN IS TRUE TO THE BEST OF MY KNOWLEDGE. NOTE: IT IS A CLASS I FELONY VIOLATION OF NORTH CAROLINA LAW G.S. 130A-26.2 TO MAKE A FALSE STATEMENT ON THIS APPLICATION OR TO UNLAWFULLY OBTAIN A CERTIFIED COPY OF A VITAL RECORD. INCLUDE A COPY OF YOUR ID THAT IS VALID- THIS INCLUDES ANY STATE ID OR DRIVERS LICENSE, PASSPORT OR MILITARY ID. IF YOUR ID IS EXPIRED YOU CAN SEND THREE DIFFERENT DOCUMENTS/ PAPERWORK THAT HAS YOUR NAME WRITTEN OR PRINTED ON IT. PLEASE INCLUDE A SELF ADDRESSED STAMPED ENVELOPE FOR THE RETURN OF YOUR REQUESTED DOCUMENTS.

DATE: _____

Applicant's Signature

Person Processing Request: _____

Applicant's Mailing Address/Phone Number

Form of I.D. Verified _____
