

**Town of Plainville**  
**Birth Certificate Certified Copy Request Form**

Please fill out the information below. When complete, please print, sign, and mail to the address listed.

Full name at birth: \_\_\_\_\_

Place of birth: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Father's full name: \_\_\_\_\_

Mother's full maiden name: \_\_\_\_\_

**Person making this request:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Relation to person named in certificate: \_\_\_\_\_

Type of copy requested: (    ) Full Size **\$20.00** (    ) Wallet size **\$15.00**

**PLEASE ATTACH A COPY OF A PHOTO ID.**

**Make check payable to Town Clerk.**

**Mail To:**                      **Town Clerk**  
                                     **One Central Square**  
                                     **Plainville, CT 06062**

**Please include a stamped, self-addressed envelope.**