IT IS A FELONY VIOLATION OF NORTH CAROLINA LAW (G.S. 130A-26A) TO MAKE A FALSE STATEMENT ON THIS APPLICATION OR TO UNLAWFULLY OBTAIN A CERTIFIED COPY OF VITAL RECORDS.

DOCUMENTATION OF AUTHORITY MUST BE INCLUDED WITH THE REQUEST FOR AUTHORIZED AGENTS, ATTORNEYS OR LEGAL REPRESENTATIVES (N.C.G.S. 130A-93 AND –99)

APPLICATION FOR CERTIFIED COPY

BIRTH CERTIFICATE **Number of copies ___Full size** **For Office Use**

Full Name at Birth_____

Date of Birth_____ Place of Birth_____ **Book___**

Father's Full Name_____ **Page___**

Mother's Full Maiden Name_____

DEATH CERTIFICATE **Number of copies ___Full size**

Full Name of Deceased_____ **Book___**

Date of Death_____ Place of Death_____ **Page____**

MARRIAGE CERTIFICATE **Number of copies ___Full size ___Wallet**

Full Name of Groom_____

Full Maiden Name of Bride_____

Date of Marriage_____ Place of Marriage_____

The above certificate is: (Please circle your choice below)

1. Myself
2. Spouse (Husband/Wife)
3. Child/Step-child
4. Brother/Sister
5. Mother/Father/Step-Parent
6. Grandchild
7. Grandparent
8. Seeking information for legal determination of personal property rights
9. Authorized agent, attorney, or legal Representative of a person listed above

A COPY OF A VALID DRIVER'S LICENSE OR GOVERNMENT ISSUED PICTURE I.D. IS REQUIRED.

Please forward **money order, cashiers check** or **cash** to:

Edgecombe County Register of Deeds
Post Office Box 386
Tarboro, North Carolina 27886

***Please include a self-addressed stamped envelope for copies to be sent back to you in.**

_____ _____

Applicant's Signature REQUIRED **Applicant's printed name**

_____

Applicant's mailing address