

DeKalb Public Health
BIRTH CERTIFICATE REQUEST

The fee for a search of Vital Records has been established by the State Board of Health as twenty-five dollars (\$25.00) effective in this county as of July 1, 2010, in accordance with Section 31-10-27 of the Georgia Health Code. The search fee includes a certified copy of the record, if found. Additional full copies issued at the same time, on the same certificate, are five dollars (\$5.00) each. No personal checks accepted.

REQUESTOR'S INFORMATION

Your name _____

Your address _____

City _____ State _____ Zip _____

Signature _____ Date _____

Relationship to subject _____ **Present ID and proof if required**

Proof of relationship required if not parent.

BIRTH CERTIFICATE REQUEST

Full name on birth certificate _____

Date of birth _____

Birth hospital _____ or **County of Birth** _____

Father's full name _____

Mother's full maiden name _____

Note: Georgia Law Chapter 31-10-26 provides that certified copies of birth certificates be issued only to the registrant (the person whose bieth certificate is being requested), the parents or guardians or legal representatives.

\$25 fee for 1 full copy of a Birth Certificate per request.

Additional copies issued at the same time are \$5 each.

Number of copies: _____ Fee Due: _____

No Personal Checks. Fees are non-refundable.

Contact info if requesting by email or fax: (Phone): _____

(Cell): _____

ID Information _____

Search + no copy found _____ Add'l copies @ \$5 each _____

Corrected copies @ \$5 each _____

PAYMENT Cash _____ Credit/Debit _____ Ck/MO # _____ Amount _____

Receipt No. _____