



VITAL RECORDS

APPLICATION FOR CERTIFIED COPY OF CERTIFICATE OF BIRTH

IF REQUESTING BY MAIL: CHECK OR MONEY ORDER PREFERRED—DO NOT SEND CASH

DATE: _____

Fecha: _____

Full Name at Birth: _____

Nombre completo en el acta: (First/Primer) (Middle/Segundo) Last/Apellido)

Indicate Any Legal Changes of Names: _____

Indique algún cambio legal de nombre:

Date of Birth: _____ Sex: _____

Fecha de nacimiento: (Month/Mes) (Day/Día) (Year/Año) M/F

Place of Birth: _____

Lugar de nacimiento: (City/Ciudad) (County/Condado) (State/Estado)

Full name of Father: _____ Race: _____

Nombre completo del padre: Raza: _____

Full Maiden Name of Mother: _____ Race: _____

Nombre de soltera de la madre: Raza: _____

Last Name of Mother at Time of Birth: _____

Apellido de la madre al nacer:

Relationship: _____ Purpose of Copy: _____

Parentesco: Razón de la copia: _____

Telephone #: _____ Social Security #: _____

Teléfono#: Número de Seguro Social: _____

Signature of Person Making Request: _____

Firma del solicitante:

PRINT Name and Address of person requesting the Certified Copy.

Name: _____

Nombre: _____

Street or Route: _____

Dirección o ruta: _____

City: _____ State: _____ Zip: _____

Ciudad: Estado: Código Postal: _____

If paying by Credit Card all items must be completed in order to process your request.

Charge to my: _____ VISA _____ MASTERCARD _____ Pick-Up _____ Mail

Amount Enclosed: \$ _____

Account Number

Expiration Date

Certificates are available from 1949 to the present for any birth occurring in Tennessee. You may order the following:

- * A short form for births from 1949 to the present
- * A long form for births from 1966 to the present (Davidson County births only)

Indicate the number of each type of certificate desired and enclose the appropriate fee:

_____ Short form-first copy \$15.00
 _____ Each Additional Copy \$15.00

Valid ID is required

Short form is certified and shows child's name, birth date, sex, file date, county of birth and certificate number (1976-present also shows parents' names).

A short form cannot be issued if there are more than 12 first name letters, 10 middle and 14 last name letters. (Available approx. 90 days after the birth.)

_____ Long Form - First Copy \$15.00

_____ Each Additional Copy \$15.00

Fees subject to change without notice.

SEND TO: Metro Public Health Department
Vital Records (Birth Section)
2500 Charlotte Avenue
Nashville, Tennessee 37209-4129

It is unlawful to willingly and knowingly make any false statement on this application