Application for Certified Copy of Birth Certificate

REQUESTOR INFORMATION (Please Print)

Requestor Name _____
          First   Middle   Last

Address _____
          Street   City   State   Zip

Daytime Phone _____ Drivers License#_____ State of License_____ Exp Date _____

Relationship to registrant ☐ Self ☐ Parent ☐ Grandparent ☐ Step-parent ☐ Sibling ☐ Spouse ☐ Child ☐ Step-child

☐ Legal Guardian ☐ Legal Representative ☐ Other_____

By signing below, I have read and understood that there are penalties for obtaining a record under false pretenses. Effective 7/1/2003, all requests must be accompanied by a copy of the requestor's identification before processing. Please return your request with a copy of your driver's license, state ID or passport.

Signature of person making request _____Date_____

REGISTRANT INFORMATION (Please print)
Person listed on birth certificate. IF ADOPTED, provide adoptive information.

Full name at birth _____
          First   Middle   Last

Date of birth _____ Place of birth_____ Colorado
                              City   County

Is this person deceased? ☐ Yes State where death occurred:_____ Date _____
                         ☐ No   Month / Day /Year

Full name of father _____
          First   Middle   Last Name

Maiden name of mother _____
          First   Middle   Last Name Prior to First Marriage

Reason for request ☐ Newborn ☐ Travel/Passport ☐ Records ☐ School ☐ Insurance Other_____

Pursuant to Colorado Revised Statutes, 1982, 25-2-118 and as defined by Colorado Board of Health Rules and Regulations, applicant must have a direct and tangible interest in the record requested. The penalties for obtaining a record under false pretenses include a fine of not more than $1,000.00, or imprisonment in the county jail for not more than one year or both such fine and imprisonment (CRS 25-2-118)

Charges: Make check or money order payable to **City of Wray.**
              $20.00 for first copy (or search of files when no record is found)
              $13.00 for each additional copy of the same record ordered at the same time

Number of Copies_____   Cost of Certificates $_____   ☐ Cash

                                                                            ☐ Check #_____

                                Total charge $_____   ☐ Money Order #_____

Certificates will be ⬭ Picked up   ⬭ Mailed

Please note that copies of birth certificates may only be released or mailed to the Requestor.