Application for Certified Copy of Birth or Death Certificate

BIRTH – QUANTITY REQUESTED
_____ $23.00 each

DEATH – QUANTITY REQUESTED
_____ $ 21.00 1ST Certified Copy
_____ $ 4.00 each additional copy ordered at this time

Mail this application, payment and a legible photocopy of your VALID Government Issued Photo ID. If payee is different from applicant, you must submit a copy of the Valid ID of BOTH parties. * **REQUEST WILL NOT BE PROCESSED WITHOUT ID INFORMATION**

Check or money order payable to:
Jim Wells County Clerk
P.O. Box 1459 Alice, TX 78333

Full name on Birth or Death record:_____
First **Middle** **Last** ***(maiden if applicable)***

Date of Birth or Death:_____ **County of Birth or Death:** _____

Parent 1: _____
First **Middle** **Last (Maiden)**

Parent 2: _____
First **Middle** **Last**

WARNING: IT IS A FELONY TO FALSIFY INFORMATION ON THIS DOCUMENT. THE PENALTY FOR KNOWINGLY MAKING A FALSE STATEMENT ON THIS FORM OR SIGNING A FORM WHICH CONTAINS A FALSE STATEMENT IS 2 TO 10 YEARS IMPRISONMENT AND A FINE OF UP TO $10,000. (HEALTH AND SAFETY CODE, CHAPTER 195, SEC. 195.003)

Applicant's Name: _____

Daytime Phone Number:_____ **Email Address:** _____

Applicant's Mailing Address: _____
Street **City** **State** **Zip Code**

Relationship to person named on certificate: ☐ **self** ☐ **spouse** ☐ **sibling** ☐ **parent** ☐ **grandparent**

Purpose for obtaining copy of certificate: ***Please check all that apply.***

☐ **Driver License** ☐ **Housing** ☐ **Insurance** ☐ **Records** ☐ **Other**
☐ **School** ☐ **Social Security** ☐ **Travel** ☐ **Veterans** ☐ **Welfare**

☐ **PASSPORT NOTICE:** **By checking this box, I understand that this birth certificate may NOT be accepted by the Passport office if the birth certificate was not filed in our county. NO REFUNDS ISSUED**

BIRTH CERTIFICATE NOTICE: See Section 181.1(13) of the Texas Administrative Code for who qualifies as an immediate family member. An immediate family member is the child, their children, spouse, parent/guardian, sibling or grandparent. Applicants who are not immediate family members must provide legal documentation (such as a court order establishing guardianship) that demonstrates direct, tangible interest in the birth certificate.
DEATH CERTIFICATE NOTICE: See Section 181.1(13) of the Texas Administrative Code for who qualifies as an immediate family member. An immediate family member is the decedent's child, spouse, parent, sibling, or grandparent. Applicants who are not immediate family members must provide legal documentation (such as an insurance policy listing the applicant as the beneficiary) documenting a direct, tangible interest in the death certificate.

Witness my/our hand(s) this _____day of _____, 20_____.

Signature of Applicant _____

THE STATE OF_____ **}**

COUNTY OF_____ **}**

BEFORE ME, _____,
In and for said County and State, on this day personally appeared_____,
known to me to be the person(s) whose name subscribed to the foregoing instrument, and acknowledged to me that he/she/they executed the same for the purpose therein expressed.

Given under my hand and seal of office, this _____ day of _____, 20_____.

_____
Printed Name of Notary

(NOTARY SEAL)

_____
Signature of Notary