

**\$10.00 PER COPY**

**APPLICATION FOR A CERTIFIED COPY OF A VITAL RECORD  
MONTGOMERY COUNTY REGISTER OF DEEDS  
ID PROOF REQUIRED**

PLEASE PRINT OR TYPE

**\*\*\*\*BIRTH CERTIFICATE**

Full name at birth \_\_\_\_\_ # of copies \_\_\_\_\_

Date of birth \_\_\_\_\_ Place of birth \_\_\_\_\_

Father/Parent's full name \_\_\_\_\_ Office use only  
Book \_\_\_\_\_ Page \_\_\_\_\_

Mother/Parent's full name \_\_\_\_\_

**\*\*\*\*DEATH CERTIFICATE**

Full name of deceased \_\_\_\_\_ # of copies \_\_\_\_\_

Date of death \_\_\_\_\_ Place of death \_\_\_\_\_

**\*\*\*\*MARRIAGE CERTIFICATE**

Groom/Spouse's full name \_\_\_\_\_ # of copies \_\_\_\_\_

Bride/Spouse's full name \_\_\_\_\_

Date of marriage \_\_\_\_\_ Place of marriage \_\_\_\_\_

**YOUR RELATIONSHIP TO THE PERSON WHOSE CERTIFICATE IS BEING REQUESTED**  
(Circle appropriate relationship)

- 1. Self
- 2. Spouse
- 3. Brother/Sister

- 4. Child/Step Child
- 5. Parent/Step Parent
- 6. Grandparent/Grandchild

- 7. Authorized agent, attorney or legal representative of the person listed (proof required)
- 8. Other \_\_\_\_\_

.....  
I hereby certify that all the above information is true to the best of my knowledge.

NOTE: It is a violation of North Carolina law (GS 130A-96) to make a false statement on this application.

\_\_\_\_\_  
Signature of person applying for certificate

Date \_\_\_\_\_

\_\_\_\_\_  
Address (Street or PO Box)

Phone #(if needed) \_\_\_\_\_

\_\_\_\_\_  
City State Zip Code

Proof of ID: Personally Known \_\_\_\_\_ Drivers License \_\_\_\_\_ Other \_\_\_\_\_

Montgomery County Register of Deeds  
PO Box 695  
Troy NC 27371