

**APPLICATION FOR CERTIFIED COPY OF VITAL RECORD
ASHE COUNTY, NC**

BIRTH CERTIFICATE

NAME OF CHILD _____
DATE OF BIRTH _____
NAME OF FATHER _____
MAIDEN NAME OF MOTHER _____

MARRIAGE LICENSE

APPLICANT # 1 _____
APPLICANT # 2 _____
DATE OF MARRIAGE _____

DEATH CERTIFICATE

NAME OF DECEASED _____
DATE OF DEATH _____

FEE: \$10.00 PER COPY

You must also include a copy of a valid photo I.D.

THE CERTIFIED COPY OF THE ABOVE RECORD IS BEING OBTAINED FOR MY:
(CIRCLE ONE OF THE FOLLOWING)

- | | |
|---------------------------------|----------------------------------|
| 1. SELF | 9. AUTHORIZED AGENT, ATTORNEY OR |
| 2. SPOUSE | LEGAL REPRESENTATIVE OF THE |
| 3. BROTHER | ABOVE NAMED |
| 4. SISTER | |
| 5. CHILD/STEP-CHILD | |
| 6. PARENT/STEP-PARENT | 10. I AM SEEKING INFORMATION FOR |
| 7. GRANDCHILD/STEP-GRANDCHILD | THE LEGAL DETERMINATION OF |
| 8. GRANDPARENT/STEP-GRANDPARENT | PROPERTY RIGHTS |

DATE _____
SIGNATURE OF APPLICANT _____
PRINTED NAME OF APPLICANT _____
ADDRESS OF APPLICANT _____

MAKE CHECK OR MONEY ORDER
PAYABLE AND MAIL TO:

ASHE COUNTY REGISTER OF DEEDS OFFICE
150 GOVERNMENT CIRCLE, SUITE 2300
JEFFERSON, NC 28640