

Vital Records Certified Copy Request Form

Allegan County Clerk • 113 Chestnut Street, Allegan MI 49010 • 269-673-0450

www.allegancounty.org



Bob Genetski

County Clerk / Register of Deeds

** Please include a self-addressed, stamped envelope, and make check payable to Allegan County Clerk. **

REQUESTOR'S INFORMATION

Name: _____ Daytime Phone: _____

Address: _____

City, State, Zip: _____

Signature: _____ Date: _____

(Must be signed to process request)

Birth/Death/Marriage Record Fees: \$10.00 first copy, \$4.00 each additional copy of same record.

BIRTH RECORDS (For births that occurred in Allegan County) **Number of copies requested:**

• **Photo Identification must be presented with this request or a copy mailed with this request.**

Full name of person on record at time of birth: _____

Date of Birth: _____

City of Birth: _____

Parent name 1 (before marriage): _____

Parent name 2 (before marriage): _____

Eligibility – You must be eligible to request this birth record per MCL 333.2882*. Check the box that applies to you:

- | | |
|--|--|
| <input type="checkbox"/> Person named on record | <input type="checkbox"/> Court of competent jurisdiction (court order required) |
| <input type="checkbox"/> Parent named on record | <input type="checkbox"/> Legal Licensed Representative (letter of representation required) |
| <input type="checkbox"/> Legal Guardian (guardianship papers required) | <input type="checkbox"/> Birth record is at least 110 years old |

***PENALTIES:** Anyone who obtains or attempts to obtain a vital record of another person with the intent to commit identity theft or commit another crime is guilty of a felony punishable by imprisonment for up to five years and/or a fine of up to \$25,000.

DEATH RECORDS (For deaths that occurred in Allegan County) **Number of copies requested:**

Name of deceased: _____

Date of Death: _____

City of Death: _____

MARRIAGE RECORDS (For marriages licensed by Allegan County) **Number of copies requested:**

Marriage between (name at time of application): _____
First Middle Last Name at Birth or Maiden

And (name at time of application): _____
First Middle Last Name at Birth or Maiden

Date of Marriage: _____