

# Vital Records Certified Copy Request Form

Meredith Place, Kalamazoo County Clerk | 201 W Kalamazoo Ave., Kalamazoo, MI 49007  
269-383-8840 | www.kalcounty.com/clerk

## REQUESTOR'S INFORMATION

PRINT LEGIBLY

Name: \_\_\_\_\_ Day Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ City, State Zip: \_\_\_\_\_

Signature: \_\_\_\_\_ Email: \_\_\_\_\_

(Must be signed to process request)

**Birth/Death/Marriage Record Fees: \$15.00 first copy, \$5.00 each additional copy of same record.**

*Birth Record Fees (65 Years or Older): \$5.00 for senior requesting copy of their own record.*

## BIRTH RECORDS (for births that occurred in Kalamazoo County)

Number of copies requested:

**Copy of unexpired government-issued photo ID must be provided with this request.**

Birth certificates may not be available for 5-10 days after child's birth.

☐ Check if 65 or older

Full Name on Record: \_\_\_\_\_

First

Middle

Last Name at Birth

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

(MM/DD/YYYY)

City

Hospital

1. Was the person adopted? ☐ YES ☐ NO

2. Were the parents married at the time of the birth? ☐ YES ☐ NO

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:**

☐ Person named on record

☐ Court of competent jurisdiction (court order required)

☐ Parent named on record

☐ Legal Licensed Representative (letter of representation required)

☐ Legal Guardian (guardianship papers required)

☐ Birth record is at least 100 years old

☐ Heir of deceased person named on record - Relationship/Date and Place of Death: \_\_\_\_\_

**\*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 Kalamazoo County)

Number of copies requested:

Decedent's Name on Record \_\_\_\_\_

First

Middle

Last Name at Death

Date of Death: \_\_\_\_\_ Place of Death: \_\_\_\_\_

(MM/DD/YYYY)

County

## MARRIAGE RECORDS

Number of copies requested:

Spouse 1 – Name on Record (Prior to this Marriage): \_\_\_\_\_

First

Middle

Last Name at time of application

Spouse 2 – Name on Record (Prior to this Marriage): \_\_\_\_\_

First

Middle

Last Name at time of application

Date of Marriage: \_\_\_\_\_ **\*Must have applied for Marriage License in Kalamazoo County:**

(MM/DD/YYYY)

## PAYMENT / SHIPPING INFORMATION

Costs (from above) \$ \_\_\_\_\_

*\$15 for first copy, \$5 each additional copy of same record*

SHIPPING: (order is mailed to requestor's address)

☐ USPS Express Mail: \$40.00 (U.S. only)

☐ Regular mail: FREE

TOTAL COST: \$ \_\_\_\_\_

**If paying by credit card, please enter information below:**

Card Name: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

Signature: \_\_\_\_\_

\*With your signature, you are authorizing any applicable card service fee and agreeing to abide by your cardholder agreement

☐ Check payable to **Kalamazoo County Clerk** or Money Order

**No cash please**