

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THE APPLICATION.
ALL PERSONS REQUESTING A BIRTH RECORD MUST COMPLETE THE APPLICATION.

GENERAL INSTRUCTIONS

- Do NOT use this application for FAX requests. Do NOT use this application for genealogy requests.
- Use this application if you are the person named on the birth record, or that person’s parent listed on the birth record, or have court-appointed legal custody. **Please provide a legible photocopy of the entire custody paperwork; custody papers must be signed and certified or re-certified within six (6) months from the date the application is received.**
- **If you have had a name change since your birth or the birth of your child, provide documentation showing your name change, such as a certified marriage license. In the case of a marriage, we require the certified marriage license issued from a **civil entity** - that is, a city/town/village; we cannot accept a church or synagogue marriage record as proof of name change.**

FEE/MANNER OF PAYMENT

Fee: \$10.00 per copy. **NOTE: The \$10.00 fee is a non-refundable state fee, chargeable upon the Local Registrar’s search for the requested record. If the record cannot be located, a No Record Certification will be issued for the \$10.00 fee.**

- Cash, Money Order, or Bank Cashier Check made payable to TOWN OF NEW HARTFORD.
- Debit or Credit Card (\$1.95 transaction fee). For mail-in applications, we will collect your payment over the phone.
- **Personal checks are NOT accepted unless CERTIFIED.**

TYPES OF IDENTIFICATION REQUIRED - Choose One -

In accordance with New York State rules and regulations, ALL applicants must provide the original (or photocopy if applying by mail) of ONE (1) of the following as proof of identity - **NO OTHER DOCUMENTS WILL BE ACCEPTED AS IDENTITY. IDENTIFICATION THAT IS BROKEN/TORN WILL NOT BE ACCEPTED.**

- Current photo Driver’s License or photo Non-Driver’s License.
- Current Passport.
- Current NYS Medicaid Benefit card with Photo.
- Current Military Identification Card.
- Current Employer’s Photo Identification Card (must contain employee’s name, date of birth, signature, and evidence that the card is current).
- Naturalization Papers (Note: DO NOT PHOTOCOPY. It is a federal crime to photocopy this document. The original must be presented.)
- Two (2) current utility bills issued from two (2) different companies and showing applicant’s name and address. (Examples: electricity, gas, water, internet, cable, landline telephone)
- Two (2) letters from two (2) different government agencies mailed to the applicant at their physical address within the last six (6) months.

Please Note:

- If mailing your application, provide a No. 10 Self-Addressed, Stamped Return. If your need is urgent, we suggest using an overnight mail service, and include a self-addressed, pre-stamped overnight envelope that we can send back to you the day we fulfill your request.
- We are prohibited from discussing specific Vital Records information or receipt of your application and payment over the telephone. *If you wish to be notified that we have received your application, please use a mail service tracking service for your own tracking and record-keeping purposes.*

Please provide your mailing information below:
(no PO Box, business, or c/o addresses)

Name: _____
Address: _____
City: _____
State: _____ Zip Code: _____

- REMEMBER TO INCLUDE -**
- **Completed application**
 - **Photocopy of acceptable ID**
 - **Payment**
 - **Name change documentation, if required**
 - **Legal custody papers, if required**
 - **Self-addressed, stamped envelope**

**TOWN OF NEW HARTFORD****Registrar of Vital Statistics**

8635 Clinton Street
 New Hartford, NY 13413
 315-733-7500 ext. 2320 or 2325
cherylj@townofnewhartfordny.gov

APPLICATION FOR BIRTH RECORD**Check Form(s) Desired:****FEE: \$10.00**

- CERTIFICATION / Short Form. Shows ONLY name, gender, date, and place of birth.
- CERTIFIED TRANSCRIPT/Long Form. Also includes parents' names and time of birth.
- ACKNOWLEDGMENT OF PATERNITY/ PARENTAGE (LDSS-4418 or LDSS-5171). No charge.
- Please check here if you require the record for INTERNATIONAL CITIZENSHIP/FOREIGN PASSPORT.*

Office Use Only:

DOH: _____

Certified Copy: _____

By Whom: _____ Date: _____

NOTE: A No Record Certification will be issued for \$10.00 if, upon our search, the desired record cannot be located.

FIRST		MIDDLE		LAST *	
BIRTH NAME OF CHILD					
DATE OF BIRTH (Month, Day, Year)		SEX		LOCAL REGISTRATION NO. , if known	
PLACE OF BIRTH (Hospital or Street Name)		TOWN OF NEW HARTFORD		ONEIDA COUNTY	
FIRST		MIDDLE		LAST *	
FATHER'S NAME					
FIRST		MIDDLE		LAST (MAIDEN NAME) *	
MOTHER'S NAME					
Purpose for Record:	<input type="checkbox"/> Adoption (domestic)	<input type="checkbox"/> ID/DMV/Learner's Permit	<input type="checkbox"/> Retirement		
	<input type="checkbox"/> Adoption (international)	<input type="checkbox"/> Insurance	<input type="checkbox"/> Social Security		
	<input type="checkbox"/> Court/Custody/Social Svcs.	<input type="checkbox"/> Marriage	<input type="checkbox"/> Taxes		
	<input type="checkbox"/> Employment	<input type="checkbox"/> U. S. Passport	<input type="checkbox"/> Veteran's Benefits		
	<input type="checkbox"/> Housing	<input type="checkbox"/> School Registration/Sports	Other:		
Relationship to Person on Record:	<input type="checkbox"/> SELF	<input type="checkbox"/> PARENT	<input type="checkbox"/> LEGAL GUARDIAN	<input type="checkbox"/> OTHER: _____	
<i>Note: If you are an attorney applying for a birth record, please give the name and relationship of your client to the person whose record is required. A notarized statement of release is required.</i>					

My signature certifies my understanding of and agreement with the requirements as stated in the General Instructions on the application. NOTE: A No Record Certification will be issued if, upon our search, the record cannot be located. FEE: \$10.00.

Signature of Applicant:** _____ **Date:** _____

Address: _____ **Apt./Floor:** _

City: _____ **State:** _____ **ZIP Code:** _____

Phone #: () _____ **Email (optional):** _____

*** NOTE:** If child or parent is applying and the SURNAME IS DIFFERENT from when the birth record was registered, the child or parent must provide evidence of the surname change (i.e., marriage record, court order, etc.) before application is processed.

**** Driver's License or other qualifying ID must be provided in order to have your request processed. Birth record cannot be mailed to a P. O. Box without a notarized statement of release.**