

CITY OF PORTSMOUTH, NEW HAMPSHIRE BIRTH CERTIFICATE APPLICATION

INSTRUCTIONS:

Print the application to complete.

1. Please make sure all information is complete, legible, and sign the application.
2. **Enclose a photocopy of picture identification of the person requesting the record** (driver's license, passport or other picture identification). In the absence of acceptable picture identification you must complete the form "Documentation Evidence for Individuals not Possessing an Acceptable Picture Identification."
3. Enclose a check or money order made payable to the City of Portsmouth.
4. Include a self addressed stamped envelope for the return of the certificate.
5. Mail your request to: OFFICE OF THE CITY CLERK, 1 Junkins Avenue, Portsmouth, NH 03801
6. **Requests without positive identification will be returned without having been processed.**

PLEASE TYPE OR PRINT

Number of Long Form Certificates Requested: _____

Fee: **\$15.00** for the first certificate and **\$10.00** each additional certificate.

Name at Birth (First, Middle, Last): _____

Date of Birth (Month, Day, Year): _____

Father's Name (First, Middle, Last): _____

Mother's Maiden Name (First, Middle, Maiden): _____

Purpose for which the certificate is requested: _____

(Example: records, genealogy, insurance, name change, proof of identification)

Name and Address to send certificates: _____

Telephone/Email Address (in case we need to contact you): _____

Your Signature: _____ (all unsigned requests will be rejected)

Relationship to Registrant: _____ (see below)

The following stipulations apply your relationship to the individual:

- ☞ Records before 1907 are public record and familial relationship is not required.
- ☞ Records after 1907 must have a familial relationship of mother, father, brother, sister, uncle, aunt, niece, nephew, grandparent, and step parents.

*A fee of **\$15.00** is required by law for the search of the file for any one record whether the record is located or not.*

NOTICE: Any person shall be guilty of a Class B Felony if he/she willfully and knowingly make any false statement in an application for a certified copy of a vital record as per RSA 126:24.

If you should have any specific questions regarding this application, please contact the Office of the City Clerk at the telephone number listed or via e-mail. (Rev. 02/23/2011)

Thank you for visiting www.cityofportsmouth.com