

Town of Epping, New Hampshire

Town Clerk

APPLICATION FOR A CERTIFIED COPY OF A VITAL RECORD

REGISTRANT OF EVENT(S)

Birth

Number of Copies _____ (first copy issued at \$15.00; each additional copy, \$10.00)

Name of Child _____ Child's Sex _____

Father's/Parent's Full (Maiden) Name _____

Mother's/Parent's Full (Maiden) Name _____

Child's Birth date _____ Child's Birth place _____

Death

Number of Copies _____ (first copy issued at \$15.00; each additional copy, \$10.00)

Full Name of Deceased _____ Sex _____

Date of Death _____ Place of Death _____ Issued W ___ W/OUT ___ cause of Death _____

Marriage / Civil Union

Number of Copies _____ (first copy issued at \$15.00; each additional copy, \$10.00)

Prior Full Name of Groom/Person A _____

Prior Full Name of Bride/Person B _____

Date of Marriage/Civil Union _____ Place of Marriage/Civil Union _____

Divorce / Civil Union Dissolution

Number of Copies _____ (first copy issued at \$15.00; each additional copy, \$10.00)

Full Name of Husband/Person A _____

Full name of Wife/Person B _____

Date of Decree _____ Place of Decree (county) _____

New Hampshire law (RSA 5-C:10) requires that a nonrefundable search fee to be collected for each record requested. If the record is located and you meet the eligibility requirements, you will be issued the requested number of certified copies of that record.

Applicant's Name: _____
(First) (Middle) (Last)

Applicant's Address: _____
(ATTENTION INFORMATION/BUSINESS NAME)

Reason for Certificate Request: _____

Applicant's Signature: _____ Your Relationship as applicant to the Registrant: _____

NOTICE: Any person shall be guilty of a CLASS B FELONY if he/she willfully and knowingly makes any false statement in an application for a certified copy of a vital record. (RSA 5-C:14)

PLEASE NOTE: A LEGIBLE PHOTOCOPY OF THE APPLICANT'S GOVERNMENT ISSUE DPHOTO ID MUST BE INCLUDED WITH THIS REQUEST (i.e. DRIVER'S LICENSE, NON-DRIVER'S ID, PASSPORT).