APPLICATION FOR SEARCH & CERTIFIED COPY OF A VITAL RECORD

FEE: $15.00 first copy; $6.00 each additional copy
Make checks payable to: The Town of Millinocket
Town of Millinocket
197 Penobscot Avenue
Millinocket, Maine 04462
207-723-7007

DATE REQUESTED: __________

NAME OF PERSON REQUESTING RECORD: ________________________________

ADDRESS & PHONE NUMBER: __________________________________________

RELATIONSHIP TO PERSON ON RECORD: ________________________________

SIGNATURE: _________________________________________________________

PLEASE FILL IN THE APPROPRIATE INFORMATION BELOW FOR THE RECORD(S) YOU ARE REQUESTING.

BIRTH RECORD

# of copies requested: ______

BIRTH NAME: _________________________________________________________

BIRTH DATE: _______________  BIRTH PLACE: ____________________________

FATHER'S NAME: _____________________________________________________

MOTHER'S MAIDEN NAME: ____________________________________________

MARRIAGE RECORD

# of copies requested: ______

SPOUSE A NAME: _____________________________________________________

SPOUSE B NAME: _____________________________________________________

DATE OF MARRIAGE: _______________  PLACE OF MARRIAGE: _______________

DEATH RECORD

# of copies requested: ______

NAME OF DECEdent: ___________________________________________________

DATE OF DEATH: _____________________________________________________

Confidential information on the death certificate, including the cause of death, is available only to persons who have a direct and legitimate interest in the matter recorded.

[ ] WITH CAUSE OF DEATH  [ ] WITHOUT CAUSE OF DEATH

FOR OFFICE USE:

Document(s) seen for proof of identity: ______________________________________
Proof of identity of applicant:

Applicant must provide one of these:

☐ Driver's License
☐ Passport
☐ Government issued picture I.D.

OR two of these:

☐ Utility bills
☐ Bank statements
☐ Vehicle registration
☐ Income tax return
☐ Personal Check w/ address
☐ A previously issued vital record
☐ Letter from government agency requesting record (DHHS, WIC)
☐ Department of Corrections I.D. card
☐ Social Security Card
☐ DD 214
☐ Hospital; birth worksheet
☐ License/rental agreement
☐ Pay stub
☐ W-2
☐ Voter Registration card
☐ Disability award from SSA
☐ Other ________________

Establishing eligibility to acquire record:

☐ Related applicants must provide proof of lineage.
☐ Domestic Partners must provide proof of registration of domestic partnership
☐ Attorneys must provide a signed, notarized release from family
☐ Genealogists must provide a state-issued card

Do not retain copies of proof provided or note any specific numbers.