

Application for Certified Copy of Birth Certificate

Your Name

Your Address

City, State, Zip Code

Email Address

Phone Number

Date: [Insert Date]

Office of Vital Records

Address of Vital Records Office

City, State, Zip Code

Dear Sir/Madam,

I am writing to request a certified copy of my birth certificate. Below are my details:

- **Name:** [Your Full Name]
- **Date of Birth:** [Your Date of Birth]
- **Place of Birth:** [City, State of Birth]
- **Father's Name:** [Father's Full Name]
- **Mother's Name:** [Mother's Full Name]

I have enclosed the required fees and identification documents for processing my request. Please let me know if you need any further information to complete my application.

Thank you for your assistance.

Sincerely,

[Your Name]