

Stephanie A. Norman
Burke County Register of Deeds

Fee \$10.00 Cash or Money Order per Certified Copy

Please print or type

<u>BIRTH CERTIFICATE:</u> NUMBER OF COPIES _____
Name at Birth _____
Date of Birth _____
Father's Name _____
Mother's Full Maiden Name _____

<u>DEATH CERTIFICATE:</u> NUMBER OF COPIES _____
Full Name of Deceased _____
Date of Death _____

<u>MARRIAGE CERTIFICATE:</u> NUMBER OF COPIES _____
Name of Applicant 1 _____
Name of Applicant 2 _____
Date of Marriage _____

The certificate of the above named person is for (G.S. 130A-93 and 130A-99):	
<input type="checkbox"/> 1. My Own	<input type="checkbox"/> 8. I am seeking information for legal determination of person or property rights.
<input type="checkbox"/> 2. My Child/Step-Child	<input type="checkbox"/> 9. I am an authorized agent, attorney, or legal representative of the person listed above.
<input type="checkbox"/> 3. My Brother/Sister	<input type="checkbox"/> 10. Certificate needed for: _____
<input type="checkbox"/> 4. My Spouse	_____
<input type="checkbox"/> 5. My Parent/Step-Parent	
<input type="checkbox"/> 6. My Grandchild/Grandparent	
_____ Maternal	
_____ Paternal	

I hereby certify that the information I have supplied is truthful. Note: It is a felony violation of North Carolina law (G.S. 130A-26 to make a false statement on this application or to unlawfully obtain a certified copy of a birth certificate.

DATE _____

Applicant's Signature _____

Office Use Only:
Staff Initials: _____ Amount Received: \$ _____ Identification Provided: _____