

CAROL K. BRONZYK
DICKINSON COUNTY CLERK
705 S Stephenson Ave. PO BOX 609
Iron Mountain, MI 49801

DICKINSON COUNTY---REQUEST FOR CERTIFIED COPIES OF BIRTH

Date _____ ID Verification DL _____ State ID _____ Other _____

Number of copies _____ searcher's initials _____

Person Requesting Document (YOUR name): _____

Address _____ City/State _____

Phone # _____ Zip _____

I, the undersigned, affirm that I am in compliance with Michigan statues in requesting this record

Signature _____

ALL MAIL REQUESTS MUST BE ACCOMPANIED BY A COPY OF REQUESTER'S DRIVERS LICENSE OR STATE ID

INFORMATION AS IT APPEARS ON BIRTH RECORD:

Full Name on Birth Record: _____

Date of Birth: _____ City of Birth: _____

Mothers Full Maiden Name:

Last	First	Middle
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Fathers Name:

Last	First	Middle
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ELIGIBILITY – Are you eligible to request this birth record? Please check the one that applies to you:

- PERSON NAMED ON RECORD**
- PARENT NAMED ON RECORD**
- LEGAL GUARDIAN** (Must include copy of court documentation)
- LEGAL REPRESENTATIVE** (Must include copy of legal papers)
- BIRTH RECORD IS OVER 110 YEARS OLD**

The fee charged for a certified copy is \$20.00 for one copy and \$15.00 for each additional copy ordered at the same time per record. (NO PERSONAL CHECKS)



**PENALTIES; ANY PERSON WHO WILLFULLY AND KNOWINGLY MAKES FALSE APPLICATION FOR A BIRTH CERTIFICATE MAY BE FINED NOT MORE THAT \$1,000.00 AND/OR IMPRISONED NOT MORE THAN ONE (1) YEAR. MCL 333.2894(1)(b)
DCH-0569-BX Rev. 03/99 By Authority of MCL 333.2882(1) (b) and MCL 333.2891 (1-4)(8)**