

Press the print button below and take to the County Clerk's Office, or mail to the address below.  
Appropriate identification must accompany request.

## Livingston County Clerk

200 E. Grand River  
Howell, Michigan 48843

### Birth Certificate Request

**Number of copies required:** \_\_\_\_\_

Please enter all of the information below as it appears on the record.

**Full Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Place of Birth (City of Township):** \_\_\_\_\_

**Full Name of Father:** \_\_\_\_\_

**Full Maiden Name of Mother:** \_\_\_\_\_

**Note:** Birth certificate requests must have exact matches on all information and a valid picture I.D

**Your relationship to the person first named on this form:**

**Self**

**Parent**

**Guardian**

**Heir**

I the undersigned, hereby certify that the foregoing is true to the best of my knowledge and belief, and the record is being obtained for lawful purposes.

\_\_\_\_\_  
**Signature of applicant**

**Mail to:**

<b>Full Name</b>	<b>Drivers License Number</b>
<b>Street Number</b>	<b>Telephone Number</b>
<b>City , State, Zip Code</b>	<b>Social Security Number</b>

If your record is being mailed to you, the mailing address must match the address shown on the identification that is submitted.