



Town of Sabattus

Vital Records Request Form

Please note that a request may take 24-48 hours to process.

The Town Office is prohibited to verify or process vital record requests by email, fax, or phone.

Directions: Please include a COPY of a government issued ID and proof of relationship to the record for verification purposes. If receiving the records by mail, include a self-addressed, stamped envelope. Incomplete applications will not be released.

YOUR Name: _____ **Phone:** _____ **Date:** _____

Address: _____ **Email:** _____

Record Requested:

- Birth Certificate Death Certificate Marriage Certificate

Place of Birth: _____ Place of Death: _____

Mother's Name: _____

Father's Name: _____

Total # of documents requested:

____ Certified Copies (\$15 for the first copy/\$6 for each additional copy)

____ Non-Certified Copies (\$6 per copy)

Name(s) on record: _____

Event Date (Birth, Death, or Marriage): _____

If requesting marriage record, previous names: _____

Please indicate the reason for the request: _____

YOUR relationship to the person on the record (check at least one):

- __ Self __ Parent/Guardian __ Parent-in-law __ Grandparent __ Child __ Spouse __ Sibling
 __ Aunt/Uncle __ Niece/Nephew __ Gov't Agency __ Funeral Director __ Other

***If other is selected, please explain relationship:* _____

Applicant Signature: _____

For Office Use ONLY – Do not mark in this area

ID Verification: _____ State ID Case #: _____ Clerk: _____

Security Paper #: _____

Fees Collected: _____ Payment Method: _____ Date Picked Up: _____

Town of Sabattus
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