



Request for Certified Copies of Birth, Marriage, or Death Certificates

City of Calais Phone: 207-454-2521
P.O. Box 413 Fax: 207-454-2757
11 Church St cityclerk@calaismaine.org
Calais, ME 04619

Important information: In order to obtain certified copies of vital records, you must establish both your identity and eligibility to receive the requested record. Along with this completed form, please include a photocopy of your accepted ID as well as documentation needed to show that you are entitled to receive this record. If sending by mail, please include a self-addressed, stamped envelope. More information regarding accepted documentation and eligibility can be found on pages 2-4 of this application.

FEE: \$15.00 for the first copy and \$6.00 for any additional copies of the same record purchased at the same time.

<u>BIRTH CERTIFICATES:</u>		Date of Birth: _____	
Full Name on Certificate: _____			
First Name	Middle Name	Last Name	
Parent A Full Name: _____			
First Name	Middle Name	Last Name	Maiden Name (if applicable)
Parent B Full Name: _____			
First Name	Middle Name	Last Name	Maiden Name (if applicable)
<u>MARRIAGE CERTIFICATES:</u>		Date of Marriage: _____	
Full Name of Party A: _____			
First Name	Middle Name	Last Name	Maiden Name (if applicable)
Full Name of Party B: _____			
First Name	Middle Name	Last Name	Maiden Name (if applicable)
<u>DEATH CERTIFICATES:</u>		Date of Death: _____	
Full Name of Deceased: _____			
First Name	Middle Name	Last Name	
<u>Information Pertaining to the Person Requesting the Certificate</u>			
Please indicate your relationship to the person whose record is being requested:			
<input type="checkbox"/> Self	<input type="checkbox"/> Parent	<input type="checkbox"/> Spouse	
<input type="checkbox"/> Guardian	<input type="checkbox"/> Funeral Director	<input type="checkbox"/> Attorney of person on record	
<input type="checkbox"/> Registered Domestic Partner	<input type="checkbox"/> Descendant (Child, Grandparent etc.)	<input type="checkbox"/> Genealogist ID# _____	
<input type="checkbox"/> Other (please specify) _____	<input type="checkbox"/> Federal/State/Local Government Agency or Public School Official		
Applicant's Name: (Please Print) _____		If you'd like to pay by credit card, please fill in the following: (card fee will apply) Card# _____ Name _____ on Card Expiration Date: ____/____ CVV _____ _____ <div style="text-align: center;">Cardholder Signature</div>	
Applicant's Address: _____			
Applicant's Telephone Number: _____			
Number of Copies Requested: _____			
By signing below, I swear/affirm that the information above is true and correct.			
_____ Applicant's Signature:	_____ Today's Date:		



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ACCEPTABLE FORMS OF IDENTITY AND DOCUMENTATION

Proof of Identity of Applicant:

Applicant must provide one of these:

- Driver's License
- Passport
- Government issued picture I.D.

Or two of the following:

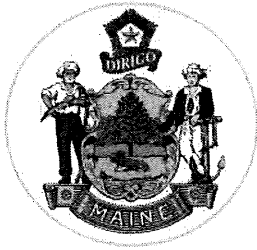
- Utility bills
- Bank statements
- Vehicle registration
- Income tax return / W2
- Personal Check w/ address
- A previously issued vital record
- Letter from government agency requesting record (DHHS, WIC)
- Department of Corrections I.D. card
- Social Security Card
- DD 214
- Hospital; birth worksheet
- License/rental agreement
- Pay stub
- Voter Registration card
- Disability award from SSA
- Medicare or Medicaid Card
- School or Employee Photo I.D.
- Other (items that include the name, address, and date of birth): _____

For establishing eligibility to receive the record:

- Related applicants must provide proof of lineage, plus ID.
- Domestic Partners must provide proof of registration of domestic partnership, plus I.D.
- A spouse must provide proof of marriage, plus I.D.
- Attorneys must provide a signed, notarized release from family, plus I.D.
- Genealogists must provide a state-issued card, plus I.D.
- Government entities must provide written request of agency letterhead, plus I.D. of requester

Note: We do not retain copies of proof provided nor do we note any specific numbers.

Maine
Department of Health and
Human Services
(DHHS)



Data, Research, and Vital
Statistics (DRVS)

Accessing Restricted Vital
Statistics Data, Reports and
Vital
Records in Maine

DIRECT AND LEGITIMATE
INTEREST

The release of restricted vital statistics data, reports and vital records is regulated by 10-146 Department rules. The rules specify who may obtain a copy of a vital record (birth, death, fetal death, marriage, divorce or registered domestic partnership) by determining why the vital record is required.

Individuals with a direct and legitimate interest in the vital record may obtain a copy of the vital record if

they meet the criteria of “direct and legitimate interest.”

The following applicants may obtain restricted vital statistics data contained in a vital reports or records by demonstrating that such information is needed for the determination or protection of personal property rights:

1. Registrant or related individuals.
2. A surviving parent acting on behalf of a child who is a minor shall be entitled to the deceased parent(s) death certificate if their parental rights have not been terminated.
3. Genealogical researchers who hold a valid genealogical researcher identification card from the Data, Research, and Vital Statistics (DRVS) office.
4. Others approved by the State Registrar who provide supporting documents of eligibility to determine they are qualified to receive such data.

Applicants demonstrating a direct and legitimate interest must present supporting documentation for the purposes of determining the applicant’s eligibility to receive the requested data or record.

Examples of Direct and Legitimate Interest:

- An individual who needs a copy of a vital record for a lawsuit for protection of personal property rights.
- An individual who needs a copy of a vital record for a creditor; (mortgage lender, creditor holding a note, Social Security, insurance purposes, etc.)
- An individual who needs a copy of a vital record to clear a motor vehicle title, or to determine a personal property right of the vehicle.
- Federal or State agencies, Maine local government or Tribal agencies, Maine municipal governments and Maine public school districts, any of which may require such vital statistics data for statistical or administrative purposes in the conduct of their official duties.

Media representatives or commercial firms other than those conducting health, medical or social research shall not be considered to have a direct and legitimate interest.

A municipal clerk or DRVS will review the supporting documentation presented by the applicant. Such documentation must be an original document or a copy of the document that has been notarized.

Examples of supporting documentation to demonstrate a direct and legitimate interest:

1. The registrant listed on birth records; the parties or officiant listed on a marriage record; the informant who provides information about a deceased person to the funeral establishment in order to file the death record, funeral director or authorized person listed on a death record; and the parents listed on a birth, death or marriage record must present identification.
2. Related individuals must present documentation to demonstrate lineage or relationship.
3. A surviving parent acting on behalf of a child who is a minor must present the birth certificate of the child naming the surviving parent or an order from a court of competent jurisdiction naming both the child and the surviving parent.
4. Genealogical researchers must present a valid genealogical researcher identification card issued from the DRVS.
5. Authorized representatives must present the written and notarized statement from the registrant as proof of contract. If the registrant is requesting a family member's record, the notarized statement or contract shall be presented in addition to supporting documentation that demonstrates lineage or relationship.
6. Federal, State, Maine local government including Tribal agencies, Maine municipal governments and Maine public school districts must present a written request on letterhead and provide

documentation of identification of the applicant who signed the request.

7. Individuals conducting health, medical and social research, including those who represent governmental agencies, must provide identification, the purpose of which the data will be used, a description of the procedures that will be used to maintain the confidentiality and security of identifying vital statistics data, and a signed confidentiality agreement.

Direct and Legitimate Interest

Documents required for the release of a restricted vital record.

1. The applicant must present identification documents at the time of application. The identification documents presented by the applicant shall be the original or a copy of a document that has been notarized. Such documentation must be acceptable by the municipal clerk or the Department and shall include:

- Government issued identification that includes a photograph
- or at least two alternate forms of identification

Documents accepted include a driver's license, a passport, or other government issued photo identification.

2. The applicant must supply a copy of the document that requires the vital record to be released; a court order, letter from attorney, letter from Social Security, letter on creditor letterhead or copy of credit agreement, insurance form or letter from insurance company, etc.

3. The current fee must be paid at the same time the above information is submitted for issuing a record.