

# City of Derby, Connecticut

*One Elizabeth Street - 06418*



Marc J. Garofalo, MPA, CCTC  
Town / City Clerk

[vitals@derbyct.gov](mailto:vitals@derbyct.gov)

Telephone (203) 736-1462 Ext. 2  
Fax (203) 736-1479

## Instructions to Obtain a Copy of a Birth Certificate by Mail

### REQUIREMENTS FOR ALL REQUESTS:

- APPLICATION:** Please complete and sign the attached "Application for Long Form Birth Certificate with Raised Seal." If filling out the form online, please download and save to your computer first so your information will be saved, then reattach to an email when submitting.
- IDENTIFICATION:** Make a copy or send a photo of the FRONT AND BACK of your current, valid Driver's License (any state).

**NOTE:** *If your driver's license has expired or if you do not currently have a valid government issued photo ID, please refer to the list provided on the application for acceptable forms of identification (at least two documents are required without a driver's license).*

- POSTAGE:** Please include a self-addressed stamped envelope for return. If one is not provided, an additional \$1.00 fee will be charged to cover postage costs.
- FEES:** The fee for a birth certificate is \$20.00 each. Payment can be made by Money Order or Credit Card (personal checks are not accepted). *Please note that if you are paying by credit card, an additional \$2.00 processing fee will apply.*

<u>If Paying By Money Order</u> <i>Make payable to the "City of Derby"</i>	<u>If Paying By Credit Card</u> <i>Credit Card Authorization Form Required (attached)</i>
Birth Certificate <u>with</u> a return envelope: \$20.00	Birth Certificate <u>with</u> a return envelope: \$22.00
Birth Certificate <u>without</u> a return envelope: \$21.00	Birth Certificate <u>without</u> a return envelope: \$23.00

- SUBMIT:** Requests are processed on the day they are received and can be submitted by:

Email: [vitals@derbyct.gov](mailto:vitals@derbyct.gov)

Regular Mail: Birth Certificate Request  
Marc J. Garofalo, Derby Town Clerk  
1 Elizabeth Street  
Derby, CT 06418

Fax: (203) 736-1479

Please feel free to contact our office during regular business hours should you have any questions or need any further assistance.



# City of Derby, Connecticut

One Elizabeth Street - 06418



Marc J. Garofalo, MPA, CCTC  
Town / City Clerk

vitals@derbyct.gov

Telephone - 203.736.1462 Ext. 2  
FAX - 203.736.1479

## Credit Card Authorization Form

### CARDHOLDER INFORMATION

Name: \_\_\_\_\_

Billing Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_ Email \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

I authorize a one-time charge against my credit card for the following amount:

\$ \_\_\_\_\_ **\$20.00** per Certified Copy of Birth, Death, or Marriage Certificate

\$ \_\_\_\_\_ **\$1.00** USPS First Class Mail (Postage)

\$ \_\_\_\_\_ **\$30.00** USPS Priority Express (1-2 Days) (Shipping)

\$ \_\_\_\_\_ **\$2.00** Credit Card Processing Fee (2.5% over \$80.00)

\$ \_\_\_\_\_ **TOTAL CHARGE**

### CREDIT CARD INFORMATION

Credit Card Type:  MasterCard  Visa  American Express  Discover Card

Number: \_\_\_\_\_

Expiration Month: \_\_\_\_\_ Expiration Year: \_\_\_\_\_

Cardholder Signature \_\_\_\_\_ Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Security Code: \_\_\_\_\_