



Danny R. Hester
Lincoln County Register of Deeds

206 Gamble Drive, 2nd Floor • Lincolnton, NC 28092
Application for Certified Copy of a Vital Record



BIRTH CERTIFICATE: # Copies _____ (\$10 each) Cash: _____ Card: _____ Check: _____ **OFFICE USE ONLY**

Name At Birth: _____ Book _____

Date of Birth: _____ Page _____

Father's Name: _____

Mother's Full Maiden Name: _____

DEATH CERTIFICATE: # Copies _____ (\$10 each) Cash: _____ Card: _____ Check: _____ **OFFICE USE ONLY**

Full Name of Deceased: _____ Book _____

Date of Death: _____ Page _____

MARRIAGE CERTIFICATE: # Copies _____ (\$10 each) Cash: _____ Card: _____ Check: _____ **OFFICE USE ONLY**

Applicant 1/Groom: _____ Book _____

Applicant 2/Bride: _____ Page _____

Date of Marriage: _____

The certificate of the above named person is for (circle one of the following) :

- | | |
|-------------------|---|
| 1. My own | 7. I am seeking information for legal determination of personal or property rights. |
| 2. My child | 8. I am an authorized agent, attorney or legal representative of the person listed above (proof required) |
| 3. My brother | 9. Certificate needed for: _____ |
| 4. My sister | |
| 5. My spouse | |
| 6. My parent | |
| 7. My grandchild | |
| 8. My grandparent | |

I hereby certify that all of the above information given is true to the best of my knowledge and belief. (N.C. general statutes 130a-93 and 130a-99.)

Date _____

Applicant's Signature

Applicant's Printed Name

Street Address

City State Zip

(Phone #)

<p><u>OFFICE USE ONLY</u></p> <p>Type of ID: _____</p> <p>ID Number: _____</p> <p>Serial Number: _____</p>
