Send request to:

Cindy Goliber, Town Clerk/Registrar
Town of Potsdam
18 Elm Street
Potsdam NY 13676
315-265-3430
townclerk@potsdamny.us

Required ID must be included with application. Make check or money order in the amount of $10.00, payable to the Potsdam Town Clerk.

Name (as recorded on birth license): | **Date of Birth:**

First *Middle* *Last* *mm/dd/yyyy*

Town where birth occurred: **Austerlitz**

Address of where birth occurred:

Street *Town* *State* *Zip*

Mother's Information

Maiden Name of Mother (as listed on birth certificate): | **Birth Certificate #:** (*if known)*

First *Middle* *Maiden Last*

Father's Information

Name of Father (as listed on birth certificate): | **Local Registration #**: (*if known)*

First *Middle* *Last*

Purpose for Which Record is Required:

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(Check One)

_____ Passport _____Employment _____Drivers License _____Veteran's Benefilts
_____Social Security _____Working Papers _____Marriage License _____Welfare Assistance
_____ Retirement _____*School Entrance* _____Court Proceeding _____Entrance into Armed Forces
_____Other (*specify*)

What is your **relationship** to person whose record is required? (*if self, state "SELF".)*

If attorney, give **name and relationship** of your client to person whose record is required:

This office requires written authorization of the person/parents whose record is requested.

Signature of Applicant: | Date Signed: *mm/dd/yyyy*

Address of Applicant:

(Applicant's Name)

(Street)

(City) *(State)* *(Zip)*

Telephone Number:

Search Fee: $10.00 Certification Fee: $10.00

Search Fee $10.00

$10.00 X _____ Add'l certified copies = _____

Total: _____

* First certified copy is included in search fee

If record is sent to a different name and address:

(Name)

(Street)

(City) *(State)* *(Zip)*