



OFFICE OF THE
WARREN CITY CLERK

Suite 205
One City Square
Warren, MI 48093-2393
Phone: (586) 574-4557

CERTIFIED COPY OF: BIRTH CERTIFICATE

(must be born in the City of Warren)

Form may be submitted in person, or by mail along with payment (made payable to: City of Warren)
Do not e-mail this application form. E-mailed forms will NOT be processed.

Name at Birth:

(first)

(middle)

(last)

Birth Date:

Father's Name:

Mother's Name (Maiden):

Mailing Address:

City, State, Zip:

Telephone:

Applicant's Signature:

Driver's License OR State ID Number \*:

\* Please provide a copy of your government issued identification (i.e. driver's license, state ID) when sending your request by mail.

Relationship:

Self

Mother

Father

Other

One Certificate: \$7.50
Each Additional Certificate: \$3.00
(per record, per transaction)

NUMBER OF CERTIFICATES:

FOR OFFICIAL USE ONLY

CHECK #

LF:

RCPT #