

LENOIR COUNTY REGISTER OF DEEDS
P.O. BOX 3289
KINSTON, NC 28502

APPLICATION FOR A COPY OF BIRTH, DEATH OR MARRIAGE CERTIFICATE

Number of _____ Certified (Legally suitable for any purpose, full size)
Copies requested _____ Uncertified (Suitable for research purposes, full size)

LENOIR COUNTY REQUIRES A \$10.00 FEE FOR EACH CERTIFIED COPY AND \$1.00 FEE FOR UNCERTIFIED COPIES. PLEASE SEND CASH OR MONEY ORDER MADE PAYABLE TO THE REGISTER OF DEEDS. NO PERSONAL CHECKS.
** PLEASE ENCLOSE A SELF ADDRESSED, STAMPED ENVELOPE FOR YOUR CERTIFICATES TO BE MAILED BACK IN.

PLEASE PRINT

BIRTH CERTIFICATE

FULL NAME _____
DATE OF BIRTH _____
FULL NAME OF FATHER _____
FULL MAIDEN NAME OF MOTHER _____

DEATH CERTIFICATE

NAME OF DECEASED _____
DATE OF DEATH _____

MARRIAGE CERTIFICATE

NAME _____
NAME _____
DATE OF MARRIAGE _____

YOUR RELATIONSHIP TO PERSON WHOSE CERTIFICATE IS REQUESTED (CHECK ONE)

- | | | |
|-----------------------------|---|---|
| 1. _____ SELF | 6. _____ GRANDPARENT | 8. _____ OTHER |
| 2. _____ SPOUSE (CURRENT) | 7. _____ AUTHORIZED AGENT, ATTORNEY
OR LEGAL REPRESENTATIVE OF
THE PERSON LISTED IN 1-6
(PROOF REQUIRED) | HOW DO YOU PLAN TO
USE THIS RECORD?
_____ |
| 3. _____ BROTHER/SISTER | | |
| 4. _____ CHILD | | |
| 5. _____ PARENT/STEP-PARENT | | |

I hereby certify that all the above information is true to the best of my knowledge. NOTE: It is a felony-violation of North Carolina Law (G.S. 130a-26) to make false statement on this application or to unlawfully obtain a certified copy of a vital record.

Signature of person applying for certificate

Street Address or P.O. Box

Type of ID used

City, State, & Zip Code

Certificate issued by