



# Request for Certified Copy of Birth Record

City of Westland, 36300 Warren Road, Westland, MI 48185  
734-467-3185

## Applicant Information:

Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*(Must be signed to process request)*

## Information as it Appears on the Birth Record:

Full Name at Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name of Hospital or address where birth occurred: \_\_\_\_\_

Mother's Full Maiden Name: \_\_\_\_\_

Father's Name: \_\_\_\_\_

**Valid Driver's License or State ID must be presented with this request, or a copy mailed with this request.**

**Eligibility:** You must be eligible to request this birth record per MCL 333.2882. Check the selection that applies to you:

\_\_\_\_ Person named on record

\_\_\_\_ Parent named on record

\_\_\_\_ Legal Guardian *(guardianship papers required)*

\_\_\_\_ Legal Licensed Representative  
*(letter of representation required)*

## Fees:

- 1<sup>st</sup> Certified Copy: \$18.00
- Each Additional Copy of the same record requested at the same time: \$6.00
- If ordering by mail, make checks payable to the City of Westland.

**Number of Copies Requested:** \_\_\_\_\_

**Address Request by Mail to:** City Clerk's Office  
Vital Records  
36300 Warren Road  
Westland, MI 48185

***\*Mail in requests must include a copy of a valid Driver's License or State ID!***

**Penalties:** Anyone who obtains or attempts to obtain a vital record of another person with the intent to commit identity theft or commit another crime is guilty of a felony punishable by imprisonment for up to five years and/or a fine of up to \$25,000.