VITAL RECORDS REQUEST FORM

Pike County Probate Court only has access to records for birth and death events that took place in the State of Georgia.

REQUESTOR INFORMATION: (please print)	**INDICATE QUANTITY**
Name of requestor: _____ Address of requestor: _____ Street Address _____ City, State, Zip Phone number: _____	Birth or Death Certificate Request: Search and 1st Copy $25.00 _____ Additional Copies (each) $5.00 _____ Total $_____
Fill in this section for **BIRTH CERTIFICATE**: (please print) Full name at birth: _____ Date of birth: _____ Place of birth: _____ Father's full name: _____ Mother's full maiden name: _____	************Office use only************ **ID type/#:_____** **DOB/EXP dates: _____** **_____** **State File #:** **_____**
Fill in this Section for **DEATH CERTIFICATE**: (please print) Subject's full name: _____ Date of death: _____ County of death: _____	

Date_____ Signature _____ Relationship _____
of person receiving record to person whose record is requested

Send request, money order, self-addressed, stamped envelope and a clear copy of the requestor's photo ID to:
Pike County Vital Records
PO BOX 324
ZEBULON, GA 30295