Clear Form | Print Form

You may print this form and fill it out by hand, or you may enter the information into the fields before printing.

MAILING ADDRESS:
DIANA T. BARRERA ,
Nueces County Clerk
P.O. Box 2627
Corpus Christi, TX 78403
361/888-0580

APPLICATION FOR CERTIFIED COPIES OF BIRTH OR DEATH CERTIFICATES

Birth	$22.00 per copy	# Requested _____	☐Standard ☐Wallet-size	Total Due $_____
Death	$20.00 for first copy, $3.00 each additional copy	# Requested _____		Total Due $_____

PLEASE PRINT THE FOLLOWING INFORMATION:

Name on Record _____
First Middle Last

Date of ☐Birth ☐Death*_____ County of ☐Birth ☐Death* _____
Month/Day/Year

Father's Name _____

Mother's Name _____
First Middle Last (Maiden)

***ADDITIONAL IDENTIFYING INFORMATION FOR DEATH CERTIFICATES ONLY**

Social Security Number of the Deceased _____- ____-_____

Birthdate:____/_____/_____ Birthplace: _____

APPLICANT INFORMATION (This information must be filled out complete)

Name_____

Full Address _____
Street Address City State ZIP

Relationship to Person Named _____

Purpose for Obtaining this Record _____

Telephone Number (____)_____ (8:00 a.m.-4:00 p.m. Monday thru Friday)

Certified copies may be issued only to properly qualified applicants who have submitted proof of their identification and have fully identified the record requested. It is a third degree felony to falsely obtain, use, or alter another person's Certificate of Birth or Death.

A qualified applicant is defined as the registrant, or immediate family member either by blood or marriage, his or her guardian, or his or her legal representative.