

APPLICATION FOR A CERTIFIED BIRTH CERTIFICATE FOR A HOMELESS PERSON

(PER NRS 440.700 5A)

The applicant must provide photo identification or sufficient verification of Identity in order to receive a Certificate.

Name of Person on the Certificate

First Name	Middle Name	Last Name
Date of Birth	County of Birth	State of Birth
Parent 1's First & Last Name	Parent 2's First & Last Name	Last Name(s) Prior to First Marriage

NRS 440.650 and NAC 440.070 requires the applicant to establish a direct relationship by blood or marriage, a legal relationship or a need to facilitate a legal process to receive a certified copy of a record. Below, indicate your relationship or your legal need for this record. Please provide proof such as a birth certificate or court order, unless the applicant is the person of record or a parent listed on the certificate. The request will be rejected if sufficient proof is not provided. Visit our website listed below for more information regarding proof required.

I hereby certify and declare under penalty of perjury under the laws of the State of Nevada that as the person requesting this certificate that I am homeless and need a certified copy. In compliance with NRS 440.700 (4a), please provide a certified certificate at no charge.

Relationship	Reason for Reques	st			
Applicant's First Name	(print)	Appl	pplicant's Last Name (print)		
Applicant's Signature			Phone Number		
Mailing Address (Street A	ddress)		City	State	ZIP
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FOR OFFICE USE ONLY		
Receipt Number:	Date:	