



ANNA L. SCHIELACK  
BURLESON COUNTY CLERK

County of Burleson  
(979)567-2329

100 West Buck, Suite 203  
Caldwell, Texas 77836

<b>BIRTH</b> <input type="checkbox"/>
# REQUESTED _____
_____ CERTIFIED COPIES X \$23.00 = _____
_____ WALLET-SIZE X \$23.00 = _____
<input type="checkbox"/> FLAG <input type="checkbox"/> STATE OUTLINE
TOTAL ENCLOSED = _____

**APPLICATION FOR  
CERTIFIED COPY OF  
BIRTH OR DEATH  
CERTIFICATE**

<b>DEATH</b> <input type="checkbox"/>
# REQUESTED _____
_____ CERTIFIED COPY X \$21.00 = _____
_____ EXTRA COPIES OF SAME RECORD X \$4.00 = _____
TOTAL ENCLOSED = _____

**LOCAL APPLICATION USE ONLY. NOT TO BE USED AS A MAIL IN APPLICATION.**

1. Full Name of Person on Record	First Name	Middle Name	Last Name
2. Date of Birth or Death	Month	Day	Year
3. Sex	4. Place of Birth or Death		State
	City or Town	County	
5. Full Name of Father	First Name	Middle Name	Last Name
6. Full Maiden Name of Mother	First Name	Middle Name	Maiden Name

7. ADDITIONAL IDENTIFYING INFORMATION FOR DEATH CERTIFICATE.

SOCIAL SECURITY NUMBER OF DECEASED \_\_\_\_\_

BIRTH DATE \_\_\_\_\_ BIRTH PLACE, ETC. \_\_\_\_\_

8. APPLICANT'S NAME: \_\_\_\_\_ 9. TELEPHONE #: ( ) \_\_\_\_\_

(MON-FRI 8:00-5:00)

10. MAILING ADDRESS: \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

11. RELATIONSHIP TO PERSON NAMED IN ITEM 1: \_\_\_\_\_

12. PURPOSE FOR OBTAINING THIS RECORD: \_\_\_\_\_

**WARNING: THE PENALTY FOR KNOWINGLY MAKING A FALSE STATEMENT IN THIS FORM CAN BE 2-10 YEARS IN PRISON AND A FINE OF UP TO \$10,000. (HEALTH AND SAFTY CODE, CHAPTER 195, SEC. 195.003)**

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

IDENTIFICATION TYPE \_\_\_\_\_  
**ATTACH PHOTOCOPY** Drivers License, I.D. Card, etc.

NUMBER \_\_\_\_\_  
on Drivers License, I.D. Card, etc.

Fees are subject to change without notice (call 512-458-7111 for fee verification). For any search of the files where a record is not found, the searching fee is non-refundable or transferable.

Birth records are confidential for 50 years and death records for 25 years; therefore, issuance is restricted. Please **attach a photocopy** of an ID to the application.

Administrative rules require that on restricted records, all identifying information (items 1-6), relationship (item 11), and purpose (item 12) be provide in order to issue the record.