

**Ripley County Health Department Vital Records Division**  
**P.O. Box 440**  
**Versailles, IN 47042**  
**Phone: 812-689-0508**

You must be an immediate relative of the person listed below to receive a copy of this certificate. Please complete all information. WE HAVE NO RECORDS PRIOR TO 1882

\*Applications cannot be faxed back to our office. They must be mailed back or brought into our office, along with the fee.

**\*READ AND FOLLOW THE DIRECTIONS BELOW\***

**PLEASE INCLUDE THE FOLLOWING ITEMS WITH YOUR REQUEST:**

1. PHOTOCOPY OF DRIVER'S LICENSE OR OTHER I.D. OF PERSON APPLYING FOR CERTIFICATE
2. \$10.00 MONEY ORDER OR CASH FOR EACH CERTIFICATE REQUESTED (NO PERSONAL CHECKS!)
3. SELF ADDRESSED STAMPED ENVELOPE (ONLY WHEN APPLYING BY MAIL)
4. COMPLETED APPLICATION

**IF ANY ITEM FROM THE LIST IS OMITTED YOUR REQUEST WILL BE RETURNED TO YOU**

TODAY'S DATE: \_\_\_\_\_ (CERTIFICATES ARE \$10.00 PER COPY)  
NUMBER OF COPIES REQUESTED \_\_\_\_\_

Full Name at Birth: (If female, please put maiden name): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth(city or town) \_\_\_\_\_

Hour of Birth(Optional) \_\_\_\_\_ Birth Weight(Optional) \_\_\_\_\_ lbs. \_\_\_\_\_ oz.

Your relationship to this person(if this is your certificate, please put "self"): \_\_\_\_\_

Father's Full Legal Name: \_\_\_\_\_

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

Birthplace of Father (State) \_\_\_\_\_ Birthplace of Mother(State) \_\_\_\_\_

Were Mother and Father married at time of birth? Yes \_\_\_\_\_ No \_\_\_\_\_

Reason Certificate is needed: Military \_\_\_ Social Security \_\_\_ Driver's License \_\_\_ Work \_\_\_ Medicaid \_\_\_ Passport \_\_\_ Other \_\_\_

Signature of Person filling out this application: \_\_\_\_\_

Address & Daytime Telephone of person filling out this application: \_\_\_\_\_

\_\_\_\_\_

(FOR OFFICE USE ONLY):

BOOK# \_\_\_\_\_ PAGE# \_\_\_\_\_ FILED \_\_\_\_\_ SEX \_\_\_\_\_

ATTENDANT \_\_\_\_\_ OCCUPATION \_\_\_\_\_

**WARNING: FALSE APPLICATIONS, ALTERING, MUTILATING, OR COUNTERFEITING INDIANA BIRTH CERTIFICATES IS A CRIMINAL OFFENSE UNDER I.C. 16-1-19-6**