

City of McAllen

TEXAS BIRTH CERTIFICATE APPLICATION

VITAL STATISTICS

P.O. BOX 220

(956) 681-1195

McAllen, Texas 78505

VOIDS _____ Copy # _____

VOIDS _____ Card # _____

Date _____

Please complete all questions and sign application

Full Name of Person on Record: _____

Date of Birth: _____ Sex Male Female
Month / Day / Year

Place of Birth (city / hospital): _____

Full Name of Father: _____

Mother's full Maiden Name: _____

Applicant's (your) Information (Your relationship to the person whose certificate you want)

- Parent (Government Issued Picture(Current) ID REQUIRED (not a copy), must be listed on certificate)**
- Self (US Government issued ID REQUIRED-must be at least 18 years of age, or if a minor a marriage license required)**
- Grandparent (Proof required: Your son or daughter's certified birth certificate (not a copy) &YOUR current ID)**
- Spouse (Proof required: Marriage License (certified copy – (not a plain copy) and current identification)**
- Brother/Sister (Proof required: Must provide your own certified birth certificate for verification and identification, and must be at least 18 years of age)**
- Legal Guardian (Proof required: Certified Court Order showing legal custody and identification- notarized document not accepted)**
- Attorney (Proof required: (Certified copy of a court issued document that establishes legal interest)**

Check which certificate you are requesting: Certified Copy – Full Sheet - only for those born in McAllen **\$23.00 ea.**

***NOTE: IF BORN IN McALLEN – CAN TAKE EITHER COPY @ \$23 OR CARD @ \$23 OR BOTH for \$46**

Wallet Size Card – If born anywhere in the State of Texas **\$23.00 ea.**

Note: If no record is found, a searching fee of \$23.00 will be charged. including McAllen

Plastic Pouch for Full Sheet @ \$1.50 each and for the Wallet Size Card @ \$1.00 each (Optional)

PLEASE INDICATE IF THERE HAS BEEN A CHANGE ON THE RECORD Yes No

My purpose to obtain this record is: _____

Indicate What Valid (CURRENT) photo Identification you will present of yourself (REQUIRED):

U.S. License State Issued I.D. Passport Resident Alien Border Crosser Matricula Consular

Name: _____ **PLEASE FILL OUT THIS PORTION**

Current Physical Address: _____ **COMPLETELY WITH YOUR**

City/State: _____ **INFORMATION**

Phone No: _____

Your Date of Birth on ID: _____

WARNING: The penalty for knowingly making a false statement on this form can be 2-10 years in prison and a fine of up to \$10,000 (Health and Safety Code, Chapter 195, Sec. 195.003.)

Signature: _____

NOTE: If you will be mailing in this application to us, you will need to attach a **Xerox copy** of your identification such as one of those indicated above that is not expired along with a **Money Order** for our fee – we do not take personal checks for payment on mail requests - and a self-addressed envelope. For **FED EX OR UPS ONLY** please send application, copy of ID(and additional required copies as indicated above) and money order to 221 S. 15th, McAllen TX 78501. For **Regular, Priority & Express Mail (U.S. Postal Service)** send to P.O. Box 220 McAllen, Texas 78505. To mail requested document back to applicant in an express manner, a prepaid & self-addressed envelope is required. **No calling for pick-up will be done by our office to any shipping service.**