**Town of Corinth**

**Vital Records Request Form**

PO Box 309, 31 Exeter Rd. Corbyn, ME 04427  PH. (207) 285-3271

Updated 10/06/2017

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*Please note that our office may take up to 24 hours to process this request. EDRS requests will be subject to State processing time limits.*

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**Current Fees:**
- $15.00 for the first certified copy and just $6.00 for each additional copy of the record.
- $10.00 for a non-certified (non-legal) copy.

**Request Directions:** Please fill in the application below and enclose a check or money order made out to the Town of Corinth with copies of supporting documents listed below. Be sure to include a self-addressed, stamped envelope and mail to: Town of Corinth, PO Box 309, Corbyn, ME 04427.

**Please Note:** The Office is prohibited from accepting vital record requests(s) via fax, email or by phone.

Once an application is received and processed, the completed record(s) may not be faxed or emailed.

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**Type of document requested:** *(Please select type to the far right and list number below)*

- ______ Certified Copy $15.00
- ______ Non-Certified $10.00
- ______ Additional Copies $6.00
- TOTAL DUE: ______________

**Applicant’s ID:** *(check/supply one)*

- ______ Driver’s License
- ______ Passport
- ______ Other Government ID

**Applicant’s relationship to the person(s) on the record:** *(check at least one)*

- ______ Self
- ______ Parent/Guardian
- ______ Grandparent
- ______ Child
- ______ Spouse
- ______ Sibling
- ______ Other*
- ______ Parent in-law
- ______ Aunt/Uncle
- ______ Niece/Nephew
- ______ Gov’t Agency
- ______ Funeral Director

**If other is selected, please explain:**

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**Applicant’s Printed Name:** ________________________________  **Telephone:** ________________________________

**Address:** ____________________________________________  **Email:** _________________________________________

**Applicant’s Signature:** ________________________________  **Date:** ________________________________

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**For office use only – do not mark in this area**

- ______ First record issued
- ______ Copies
- ______ Non-Certified
- ______ Cert # (s)

- ______ EDRS Request
- ______ Copied
- ______ Typed
- Fee(s) Collected: ____________  **CK#__________  **Cash**

**Date Completed:** ________________________________  **Clerk:** ________________________________

If application was denied – please have Town Clerk sign this form before filing:

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If application denied, list reason why: ____________________________________________________________

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