OFFICE USE
Certificate(s)
Receipt
Payment
Clerk

The City of Paris
City Clerk's Office
150 SE 1st Street
Paris, Texas
Deputy City Clerk - 903-784-9291
City Clerk - 903-784-9248
Fax - 903-784-1798

BIRTH CERTIFICATE: $23 EACH CERTIFIED COPY [choose one of the following options]

[NOTE: Long form is only available from our office if born inside the city limits of Paris]

1 COPY $23.00 **2 COPIES $46.00** **OTHER:**_____

DEATH CERTIFICATE: $21 FIRST CERTIFIED COPY AND $4 EACH ADDITIONAL [choose one of the following options]

1 COPY $21.00 **2 COPIES $25.00** **3 COPIES $29.00** **4 COPIES $33.00** **5 COPIES $37.00**

OTHER: _____

PRINT LEGIBLY

1. Full name of person on record: [MAIDEN NAME IF FOR BIRTH CERTIFICATE]

2. Sex: [choose one] MALE or FEMALE

3. Date of birth: City of birth:

4. Full name of mother or parent 1 [include maiden name]:

5. Full name of father or parent 2 [if applicable]:

6. Date of death: City of death:

7. Full name of person requesting certificate:

8. Your physical address:

9. Your telephone number:

10. Your relationship to person listed on line 1:

11. Purpose for obtaining this record: [circle one] DRIVER'S LICENSE RENEWAL RECORDS INSURANCE NEWBORN SCHOOL PASSPORT OTHER:_____

If you need this record to apply for a CDIB (Indian heritage), you MUST apply through the State of Texas, Bureau of Vital Statistics in Austin by either visiting their website www.dshs.texas.gov/vs or we can provide you their application upon request. If additional assistance is needed, you may call their office at 1-888-963-7111

WARNING: IT IS A FELONY TO FALSIFY INFORMATION ON THIS DOCUMENT.
THE PENALTY FOR KNOWINGLY MAKING A FALSE STATEMENT ON THIS FORM OR FOR SIGNING A FORM WHICH CONTAINS A FALSE STATEMENT IS 2 TO 10 YEARS IMPRISONMENT AND A FINE OF UP TO $10,000.
(HEALTH AND SAFETY CODE, CHAPTER 195, SEC. 195.003)

Your Signature_____ Date of Application _____

FOR MAIL ISSUANCE, SEND ALL OF THE FOLLOWING:

1. COMPLETED APPLICATION
2. SWORN STATEMENT
3. PHOTOCOPY OF THE SWORN PHOTO ID
4. PAYMENT [CHECK OR MONEY ORDER ONLY]
5. STAMPED AND ADDRESSED RETURN ENVELOPE

TO:
THE CITY OF PARIS
CITY CLERK'S OFFICE
P.O. BOX 9037 PARIS, TX 75461

MAKE CHECKS PAYABLE TO
THE CITY OF PARIS

MAIL APPLICATIONS RECEIVED WITHOUT ALL ITEMS NOTED ABOVE WILL NOT BE PROCESSED