



219 Fosters Point Road
 West Bath, ME 04530
 207-443-4342

VITAL RECORDS REQUEST FORM

FEES: \$15.00 for first certified copy, \$6.00 for additional copies purchased at same time.

Mailed requests require a copy of requester's driver's license (or other identification), proof of lineage, and a money order or check made payable to the Town of West Bath

(for more information on the above requirements visit the Vital Records section of our website www.westbath.org)

BIRTH RECORD	Full Name of Child
	Date of Birth
	Place of Birth
	Father's Full Name
	Mother's Full Name – Maiden
	Relationship to child

DEATH RECORDS	Full Name of Decedent
	Date of Death
	Place of Death
	Relationship to Decedent

MARRIAGE RECORDS	Full Name of Groom
	Full Maiden Name of Bride
	Date of Marriage
	Place Marriage license obtained

Signature: _____

Printed Name: _____

Address: _____

Phone: (_____) _____

Please contact the Town Clerk with any questions at (207) 443-4342 or townclerk@westbathmaine.gov