

Village of Walton

Incorporated 1851

MAYOR: EDWARD SNOW, SR.
TRUSTEES: DAVID BREESE
TERESA O'LEARY
STEPHEN CONDON
STEVE SEHEN

JODY BROWN
Village Clerk/Treasurer

MISTY PHOENIX
Deputy Clerk/Treasurer



MUNICIPAL BUILDING
21 NORTH ST. PO BOX 29
WALTON, NY 13856
607-865-4358
vclerk@stny.rr.com
www.villageofwalton.com
TDD 1-800-662-1220

PAUL OLSEN
Police Chief

ROGER D. HOYT
Public Works Superintendent

STEPHEN L. DUTCHER
Code Enforcement Official

DAVID MERZIG
Attorney

Application for Copy of Birth Record

For Office Use Only:

Date Issued: _____

By: _____

Please complete form, **have signature notarized** and enclose fee of
\$10.00 per copy or No Record Certification. Make **money order** payable
to Village of Walton P.O. Box 29, Walton, NY 13856
Enclose a self-addressed, stamped envelope.

Applicant

Name: _____

Street: _____

City/State/Zip Code: _____

Telephone: _____

Relationship to person named on birth certificate:

Self Mother/Father Other (please explain) _____

Purpose for which record is required (check one)

Kindergarten Registration

Employment Certificate

Veteran's Administration

Public Relief or Government
Compensation

Other (please explain) _____

Birth Certificate Information

Full Birth Name: _____

Date of Birth: _____

Full Maiden Name of Mother: _____

Father's Name: _____

State of _____

County of _____

Sworn to me this _____ day of _____, _____

Signature of Applicant

Notary Public