

**Georgia Birth or Death (circle one) Certificate Request Form**

**1<sup>ST</sup> Certificate \$25, Additional Certificates \$5**

**\*Payment must be in the form of a money order\***

Name on Certificate: \_\_\_\_\_

County of Birth or Death: \_\_\_\_\_ Date of Birth or Death: \_\_\_\_\_

Requestor's Name: \_\_\_\_\_

Requestor's Address: \_\_\_\_\_

Requestor's Relationship to Certificate Holder: \_\_\_\_\_

Requestor's Phone Number: \_\_\_\_\_ How Many Certificates: \_\_\_\_\_

**Please include a copy of your driver's license or passport for identification purposes.**

**Request will be processed within 24 hours. Mail or Pickup (circle one)**

**FAILURE TO INCLUDE A COPY OF YOUR DRIVER'S LICENSE OR  
PASSPORT AND MONEY ORDER WILL RESULT IN THE REQUEST NOT  
BEING PROCESSED.**

YOU MUST INCLUDE YOUR RELATION TO THE PERSON THAT YOU ARE  
REQUESTING A BIRTH CERTIFICATE AND PROVIDE PROOF OF SAME. FOR  
EXAMPLE, IF YOU ARE THE CHILD OF THE PERSON YOU ARE REQUESTING THE  
BIRTH CERTIFICATE, YOU MUST INCLUDE YOUR BIRTH CERTIFICATE.

MAIL THIS FORM AND A COPY OF YOUR ID TO FAYETTE PROBATE COURT, ONE  
CENTER DRIVE, FAYETTEVILLE, GA 30214.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE