



Jennifer Fogg, County Clerk
 1111 East Yellowjacket Ln.
 Suite 100
 Rockwall, Texas 75087

For Office Use Only: (Blue Ink Only)
 State/Rockwall
 Paper #: _____
 Last Name: _____

APPLICATION FOR TEXAS BIRTH CERTIFICATE OR ROCKWALL COUNTY DEATH CERTIFICATE

SEARCH

\$10.00 each

BIRTH – Number Requested _____

\$23.00 each (includes search fee)

Adoption: Yes _____ No _____

DEATH – Number Requested _____

\$21.00 for the 1st Certified Copy (includes search fee)

\$4.00 for each additional request at the current time

Full Name on Birth/Death Record

First _____ Middle _____ Last _____ Suffix (if applicable) _____

Date of Birth or Death _____ Gender _____

City of Birth/Death _____ County of Birth/Death _____

Mother/Parent 1 _____

First _____ Middle _____ Maiden Last Name (Before First Marriage) _____

Father/Parent 2 _____

First _____ Middle _____ Last _____ Suffix (if applicable) _____

Applicant Name _____

First _____ Middle _____ Last _____

Applicant Phone Number _____ Email Address _____

Applicant Mailing Address _____

Street _____ City _____ State _____ Zip Code _____

Relationship to Person Named on Birth/Death Record _____

Purpose for Obtaining Copy of Certificate: Driver License _____ School _____ Passport _____
 Social Security _____ Travel _____ Newborn _____ ID _____ Other (please specify) _____

NOTICE: Incomplete applications will not be processed. I understand that this record may not be accepted by the Passport Office. You are obligated to purchase all printed records.

Signature of Applicant _____ Date _____

AFFIDAVIT (NOTARY SECTION)

State of _____ County of _____. This instrument was acknowledged before me on _____.

By _____

Printed Name of Notary _____

WARNING: It is a Felony to falsify information on this document. The penalty for knowingly making a false statement on this form or signing a form which contains a false statement is 2 to 10 years imprisonment and a fine up to \$10,000. HS&C Chapter 195, Sec 195.003. Updated 9.07.2023