

Agent Authorization

This form allows the entitled person to appoint an Authorized Agent or Legal Representative for the purpose of obtaining a Certified Copy of a Vital Record from the Forsyth County Register of Deeds Office. The Agent must present this completed **notarized** document and show valid ID before receiving the record.

I, _____ authorize the Forsyth County Register of Deeds
Full name of entitled person

to give a Certified Copy of a Vital Record to _____, pursuant to NC General
Agent/Legal Representative

Statute 130A-93 & 99. I am the _____ of _____
Relationship to entitled person Name on the record

I am requesting a Certified Copy of a _____ Birth _____ Death _____ Marriage _____

Date of Birth _____ Date of Death _____ Date of Marriage _____

Reason for requesting the record: _____
optional

Signature of entitled person

Date

Notary Acknowledgment

State of _____, County of _____

I, _____, a Notary Public do certify that _____

personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and notarial seal this _____ of _____, 20_____.

Seal Stamp

Notary Public

My commission expires _____