



Town of Stow REQUEST FOR INFORMATION

OFFICE OF THE TOWN CLERK

**FILL OUT ALL SPACES
HIGHLIGHTED
IN YELLOW
SO WE KNOW HOW TO
CONTACT YOU.**

Request Date: _____

For Office Use:

Amount due: _____

Pick up date: _____

☐ Call when Ready (date called) _____

☐ Mail –(payment rec'd date) _____

Name: _____ Tel. Number: _____

Cell Number: _____

Mailing Address: _____

Vital Records

Birth _____ Death _____ Marriage _____

\$10.00 per copy

Name: _____ Date of Event: _____

Name: _____ Date of Event: _____

Name: _____ Date of Event: _____

IF YOU NEED A VITAL RECORD

1. MARK WHAT KIND

(Birth, Death, or Marriage)

2. LIST NAME(S) & DATE ON RECORD.

(marriage certificates will have 2 names – don't forget to use maiden name of person if applicable)

3. TELL US HOW MANY OF EACH RECORD YOU NEED

4. Do NOT leave Cash.

Information / Copies

Five cents (\$0.05) per photocopied page.

Search fee based on the salary of staff performing the search. (\$25.00/hr.)

Information requested: _____

**IF YOU NEED OTHER INFORMATION,
DOCUMENTS, OR COPIES OF
DOCUMENTS FILED IN OUR OFFICE –
PLEASE WRITE A NOTE IN THE SPACE
PROVIDED AND WE WILL GET BACK TO
YOU WITH A COST ESTIMATE OR A DAY
& TIME TO VIEW THE FILES**

Number of pages: _____ Estimated Time to Search & Copy Information: _____

Approximate Cost: _____ (actual cost will depend on actual search/preparation time.)

_____ Contact me if the Actual Cost will exceed the Approximate Cost by more than \$ _____

Date to Pick-Up: _____

I have requested the above information. I understand that the search time quoted is an estimate and actual costs may be higher. I agree to pay all fees associated with the cost of searching and copying the requested information.

Signed: _____ Date: _____