

LEGAL-EAZE International Adoption Specialists

NYC Couriers and Dossier Preparers - Celebrating our 13th Year - 1996 to 2009

NYC BIRTH/DEATH RECORDS PROCESSING FORM

To request courier service to obtain NYC birth or death records, please complete this form (only one needed for multiple documents) and submit it with the following: (1) check or money order for total amount due, payable to "Legal-Eaze"; (2) notarized authorization letter; (3) copy of driver's license; (4) copy of birth or death record; and (5) prepaid return OVERNIGHT mailer (such as FedEx). Please e-mail us at NYOffice@Legal-Eaze.com to let us know the request is coming. Confirmation of receipt is by e-mail.

Mail to: Legal-Eaze, 366 Amsterdam Avenue, Suite 275, New York, NY 10024 (845) 642-2990 Attn: Vital Records

Please print CLEARLY:

Name:		Date:	
Address:			
City:	State:	Zip:	
Home Phone:	Work Phone:	Cell Phone:	
E-mail Address:		Fed Ex or Credit Card* No.(exp date):	for fedex purposes only

Mailing Address (for return of documents) Mailing Address is same as above

*for overnight mail purposes ONLY (if no mailer enclosed); all other payments by check or money order ONLY.

Please complete if mailing address is different, for example: office address.

Company Name:		Attn:	
Address:			
City:	State:	Zip:	
Work Phone:			

I have enclosed a check or money order (credit cards not accepted), payable to "Legal-Eaze" for the following services:

Type of Service	Fee for each Doc	# of Docs	Subtotal "A"	Legal-Eaze Fee	# of Docs	Subtotal "B"	Amount Due Legal-Eaze (add A + B)
Birth Certificate <input type="checkbox"/> Short Form ¹ <input type="checkbox"/> Long Form with Letter of Exemplification ²	\$ 15.00	X ____	= \$ _____	\$ 90.00	X ____	= \$90.00	\$ _____
Birth Certificate <input type="checkbox"/> Short Form ¹ <input type="checkbox"/> Long Form with Letter of Exemplification ²	\$ 15.00	X ____	= \$ _____	\$ 90.00	X ____	= \$90.00	\$ _____
Death Certificate <input type="checkbox"/> Short Form ¹ <input type="checkbox"/> Long Form with Letter of Exemplification ²	\$ 15.00	X ____	= \$ _____	\$ 90.00	X ____	= \$90.00	\$ _____
GRAND TOTAL DUE LEGAL-EAZE*							\$

Important Notes:

*payable by check or money order only.

- This version cannot be legalized for use overseas.
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New York City Office: 366 Amsterdam Avenue, Suite 275, New York, NY 10024 • (845) 642-2990 • NYOffice@Legal-Eaze.com

INSTRUCTIONS:

If you want Legal-Eaze to obtain vital records (birth/death/marriage certificates, etc.):

- (1) Prepare and sign one (1) original authorization letter for each different record requested using the format below;
- (2) attach a copy of your driver's license or passport (with photo) to the letter;
- (3) have notarized;
- (4) enclose a photocopy of the birth or death certificate; if you do not have a copy, then supply as much information as you have such as full name, date of birth(death), place of birth(death), borough of birth(death), father's full name, and mother's full maiden name.
- (5) enclose a check payable to "Legal-Eaze" for full amount due;
- (6) enclose a prepaid return overnight fedex envelope (or include a credit card number).

Mail to:

Legal-Eaze
366 Amsterdam Avenue, Suite 275
New York, NY 10024
Attn: Vital Records
(845) 642-2990
nyoffice@legal-eaze.com

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If you want to proceed with authentication after we obtain the birth/death certificate, please visit our website page for "NYC Courier Service" and follow the instructions.

Your Name
Your Address
Your Phone Number

_____, 200__

TO WHOM IT MAY CONCERN:

I hereby authorize Ms. Patti Urban, Mr. Chris P. Moore, Ms. Chandra Moore, or any other employee or agent of Legal-Eaze International Adoption Specialists LLC to obtain vital records for me, including but not limited to, birth/death/marriage/divorce certificates.

The vital records are to be released to the above-named authorized recipient(s) or sent directly to Legal-Eaze International Adoption Specialists LLC at 366 Amsterdam Avenue, Suite 275, New York, NY 10024.

Enclosed is a photocopy of my driver's license.

If you have any questions or need any additional information, please do not hesitate to contact us.

Sincerely,

Your Name

STATE OF _____)
COUNTY OF _____)

On this _____ day of _____, 200_ before me personally appeared the within named _____, to me known and known to me to be the individual described in and who executed the foregoing and acknowledged that (s)he executed the same.

Notary Public

Attachment: Copy of Driver's License or Passport