



**Donna Lent, Town Clerk**

Lauren Thoden, Deputy Town Clerk  
One Independence Hill, Farmingville, NY 11738 (631)  
451-9101 FAX: 451-9264

TC-01 Supplement A rev. 1/14

**Notarized Authorization to Mail a Birth Certificate to a Post Office Box  
or Third-Party Address**

I, \_\_\_\_\_, hereby authorize the Office of the Town Clerk of the Town of Brookhaven to  
mail the requested birth certificate to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

\_\_\_\_\_  
Signed

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Date

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

On the \_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_, before me, the undersigned, personally appeared  
\_\_\_\_\_ proved to me on the basis of satisfactory evidence to be the individual whose name  
is subscribed to the within instrument and acknowledge that he executed the same in his capacity, and that by  
his signature on the instrument, the individual, or the person upon behalf of which the individual acted,  
executed the instrument.

\_\_\_\_\_  
Notary Public