



Marin County Recorder
3501 Civic Center Drive, Room 232
San Rafael CA 94903

Recorder (415) 473-6092 - Copy Center (415) 473-6094 - FAX (415) 473-7893
<http://www.marincounty.org/Home/Depts/AR/Divisions/Recorder>

COPY ORDER FORM

Requestor's Full Name		Telephone Number		Email Address	
Street Address			City		State
Mailing Address for copies (if different from above)			City		State
					Zip Code

OFFICIAL RECORD REQUEST

Copy Fee (per document): \$4.00 for 1st page + \$2.00 for each additional page
 Certification Fee: Add \$4.00 per document. Only complete documents can be certified.
Certified copies cannot be emailed.

Document Reference No. (Book & Page if recorded prior to 1981)		Document Title			Name(s) Referenced on Document	
# Pages	# Copies	Complete Copy? <input type="checkbox"/> Yes <input type="checkbox"/> No - If no, list pages requested:	Certified Copy? <input type="checkbox"/> Yes <input type="checkbox"/> No	Total Fee:	Copy Delivery Method: <input type="checkbox"/> US Mail <input type="checkbox"/> Email	
					Email address:	

Document Reference No. (Book & Page if recorded prior to 1981)		Document Title			Name(s) Referenced on Document	
# Pages	# Copies	Complete Copy? <input type="checkbox"/> Yes <input type="checkbox"/> No - If no, list pages requested:	Certified Copy? <input type="checkbox"/> Yes <input type="checkbox"/> No	Total Fee:	Copy Delivery Method: <input type="checkbox"/> US Mail <input type="checkbox"/> Email	
					Email address:	

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# Pages	# Copies	Complete Copy? <input type="checkbox"/> Yes <input type="checkbox"/> No - If no, list page numbers requested:	Certified Copy? <input type="checkbox"/> Yes <input type="checkbox"/> No	Total Fee:	Copy Delivery Method: <input type="checkbox"/> US Mail <input type="checkbox"/> Email	
					Email address:	

MAP REQUEST

Copy Fee: \$5.00 per page - Certification Fee: Add \$4.00 per map
Certified copies cannot be emailed

Name of Map:		Map Reference (Book & Page):		Type of Map <input type="checkbox"/> Subdivision <input type="checkbox"/> Parcel <input type="checkbox"/> Record of Survey		
# Pages	# Copies	Complete Copy? <input type="checkbox"/> Yes <input type="checkbox"/> No - If no, list page numbers requested:	Certified Copy? <input type="checkbox"/> Yes <input type="checkbox"/> No	Copy Delivery Method: <input type="checkbox"/> US Mail <input type="checkbox"/> Email		
					Email address:	

Name of Map:		Map Reference (Book & Page):		Type of Map <input type="checkbox"/> Subdivision <input type="checkbox"/> Parcel <input type="checkbox"/> Record of Survey		
# Pages	# Copies	Complete Copy? <input type="checkbox"/> Yes <input type="checkbox"/> No - If no, list pages numbers requested:	Certified Copy? <input type="checkbox"/> Yes <input type="checkbox"/> No	Copy Delivery Method: <input type="checkbox"/> US Mail <input type="checkbox"/> Email		
					Email address:	

PAYMENT

All requests must be accompanied by payment.

- CHECK/MONEY ORDER ENCLOSED** - Payment may be made by check drawn on a California bank (no out-of-state checks accepted), cashier's check, or money order payable to: "Marin County Recorder." Checks must be imprinted with account holder name, address, and telephone number.
- CREDIT CARD:** Credit card requests are processed through VitalChek, an independent service provider. A service fee of \$7.00 per transaction will be added to all credit card orders. Please provide the following information to authorize the Marin County Assessor-Recorder-County Clerk to charge your credit card.

Cardholder Name (as it appears on credit card)		Card Number		Type of Card		Expiration Date (MM/YY)		
				<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Amex <input type="checkbox"/> Discover				
Billing Address			City		State		Zip Code	

Return completed form with payment: Mail: Marin County Recorder P.O. Box C San Rafael CA 94913 Fax: (415) 473-7893 Email: recorder@marincounty.org