



Mail completed form to:
30-30 47th Avenue, 10th Fl
Long Island City, NY 11101



Birth Evidence Affidavit

This affidavit is for members and beneficiaries who are unable to produce a birth certificate or any of the birth evidence documents accepted by NYCERS but can submit three alternative birth records. (For a list of acceptable evidence of birth date, see NYCERS' Birth Evidence Alternatives Fact Sheet #709 at www.nycers.org.) Please complete the requested information and return this affidavit to NYCERS together with copies of the three documents. **NOTE: If the address you provide on this form is different from your address in our system, the new address will become your official address in our records.** If you have any questions regarding this affidavit, please contact our Call Center at (347) 643-3000.

Member Number	OR	Pension Number	Last 4 Digits of SSN	Daytime Phone
				()

First Name	M.I.	Last Name

In Care of (if applicable)

Address	Apt. Number

City	State	Zip Code

This affidavit must be signed before a Notary Public or Commissioner of Deeds and accompanied by three (3) documents to verify your birth date.

Statement:

I, the undersigned, depose and say that I am unable to produce a Birth Certificate, Hospital Birth Record, Ecclesiastical Record (religious document establishing my date of birth or age), State or Federal census record (established near birth date), valid U.S. passport or U.S. Passport Card, Naturalization (citizenship) certificate, or delayed birth certificate, and that in substantiation of the correct date of birth and in lieu of said documents, **I am submitting herewith:**

1. _____
2. _____
3. _____

Signature of Member	Date

This form must be acknowledged before a Notary Public or Commissioner of Deeds

State of _____ County of _____ On this ____ day of _____ 20____, personally appeared before me the above named, _____, to me known, and known to me to be the individual described in and who executed the foregoing instrument, and he or she acknowledged to me that he or she executed the same, and that the statements contained therein are true.

If you have an official seal, affix it

Signature of Notary Public or Commissioner of Deeds _____

Official Title _____

Expiration Date of Commission _____

Sign this form and have it notarized